



ADMINISTRATOR
HEALTH & WELFARE BENEFITS
MANUAL

Revision Date: June 2024

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INTRODUCTION

Welcome to the VBA Benefits Corporation's Health & Welfare Employee Benefits Manual. This manual is intended to be a guide that will assist you in administering your VBA benefit programs. It does not describe the benefit plan design offerings, or the specific design provisions that are unique to each employer. General benefit plan information can be found on our website: [Explore Employee Benefits - Virginia Bankers Association \(vabankers.org\)](http://www.vabankers.org).

The following are topics that will be covered in this guide:

- Contact information for both insurance carrier partners and the VBA Benefits staff
- Plan eligibility requirements, participation requirements and special administrative rules
- ACA compliance support
- HIPAA compliance support
- COBRA administration

OVERVIEW OF VBA BENEFITS CORPORATION

Since 1946, the VBA has offered several employee benefit programs for member employers. All benefits are provided through contracts issued by insurance carriers and other providers to the VBA Insurance and Retirement Trusts. Daily operation of the benefit programs is the responsibility of the VBA Benefits Corporation.

VBA Employee Benefit Programs are monitored by the VBA Benefits Corporation Board of Directors. Selected from participating VBA members, the Board of Directors meets quarterly to review performance goals and to oversee program operations. The Board's purpose is to guarantee that our programs, coverage provisions, and costs are the best programs for their fellow Association members.

Our fee structure is designed to cover our operational costs while providing services that are valuable to the Association's members. Our intention is not to make a profit on your employee benefit plans.

Effective January 1, 2015, the VBA's medical and dental plans became self-funded, which required the creation of two VBA trusts where premiums are held and paid to carriers:

- The Virginia Bankers Association Medical and Dental Trust; medical and dental coverages.
- The State Bankers Association Group Insurance Trust; fully insured ancillary coverages.

Both trusts are maintained by Truist, our directed Trustee.

CONTACT INFORMATION

VBA BENEFITS STAFF

| Name | Title | Direct Dial | Email Address |
|-----------------|---------------------------------------|--------------|--|
| Laurie Milligan | President & COO | 804-819-4721 | lmilligan@vabankers.org |
| John Snead | SVP, Member Relations | 804-819-4733 | jsnead@vabankers.org |
| Bobbi Weimer | Sr. Director, Operations & Compliance | 804-819-4719 | bweimer@vabankers.org |
| Pam Connelly | Sr. Director, Benefit Plan Analysis | 804-819-4752 | pconnelly@vabankers.org |
| Gabby Bond | Benefits System Manager | 804-819-4722 | gbond@vabankers.org |
| Cindy Beazley | Benefits Coordinator | 804-819-4705 | Cbeazley@vabankers.org |
| Vicky Heller | Benefits Administrator | 804-819-4749 | vheller@vabankers.org |

For general inquiries please call the VBA Benefits Corporation at 1-800-643-5599 or email benefits@vabankers.org.

PARTNERS – EFFECTIVE JANUARY 1, 2024

| Benefit | Carrier | Telephone Number | Website |
|---------------------------------------|---------------------------------------|-----------------------------------|---|
| Medical | Anthem Health Guide | 1 (833) 831-0085 | www.anthem.com |
| Pharmacy | CarelonRx Pharmacy Member Services | 1 (833) 262-1729 | www.anthem.com |
| Health Savings Account Administration | Health Equity | 1 (866) 346-5800 | www.healthequity.com |
| Dental | Delta Dental | 1 (800) 237-6060 | www.deltadentalva.com |
| Life | Securian (Minnesota Life) | 1 (800) 643-5599 (VBA) | www.securian.com |
| Disability (LTD/STD) | Lincoln Financial (Liberty Mutual) | 1 (800) 643-5599 (VBA) | www.lfg.com |
| Vision | VSP | 1 (800) 877-7195 | https://vba.vspforme.com |
| Flexible Spending Accounts | Flexible Benefit Administrators, Inc. | 1 (877) 532-5478 | https://fba.wealthcareportal.com |
| COBRA | Flexible Benefit Administrators, Inc. | 1 (800) 437-3539 | https://cobrapoint.benaissance.com |
| Group Critical Illness | Securian | 1 (855) 750-1906 | http://securian.com/vba-insurance |
| Group Hospital Indemnity | Securian | 1 (855) 750-1906 | http://securian.com/vba-insurance |
| Group Accident | Securian | 1 (855) 750-1906 | http://securian.com/vba-insurance |
| Group Legal | MetLife Legal | 1 (800) 821-6400 (client svc ctr) | www.legalplans.com |
| Pet Insurance | Nationwide | 1 (877) 738-7874 | http://benefits.petinsurance.com/vabankers |

ELIGIBILITY REQUIREMENTS

Medical and Prescription Drug – Anthem

- Employees who work a minimum of 20 hours per week. Minimum can be set at a higher amount by the employer.
- Spouses and domestic partners*
- Children, up to age 26; coverage ends on the last day of the month they turn 26.**
- Retirees, age 55 but under 65, with a minimum threshold years of service as chosen by employer (typically 10 years); employer must choose to offer coverage company-wide and premiums calculated as 150% of active rates.
- A retiree's covered spouse under age 65 may keep his or her coverage until age 65.
- Board of Directors can be covered only if they receive a W-2 from the employer; VBA will grandfather those covered under the plan prior to 2014.
- Employees who are not actively at work cannot stay on the plan for longer than six months.

Medicare Supplement – The Hartford/Benistar (Express Scripts)

- Employees or retirees who are Medicare-eligible (age 65 or older) and currently covered under one of the VBA active medical plans are eligible for this benefit.
- Covered spouses over age 65 are eligible if currently covered under one of the VBA active plans AND the employee is not yet Medicare-eligible and covered under the VBA medical plan as an active employee.

Dental – Delta Dental

- Employees who work a minimum of 20 hours per week. Minimum can be set at a higher amount by the employer.
- Spouses and domestic partners*
- Children, up to age 26; coverage ends on the last day of the month they turn 26.**
- Retirees and spouses who are covered under a VBA dental plan are eligible; spouses cannot elect coverage if the retiree does not elect coverage.
- Covered spouses/dependents are not issued their own ID card; only 1 card is issued to the employee/retiree and serves all those covered.

Vision - VSP

- Employees who work a minimum of 20 hours per week. Minimum can be set at a higher amount by the employer.
- Spouses and domestic partners*
- Children, up to age 26; coverage ends on the last day of the month they turn 26.
- Retirees and spouses who are covered under a VBA vision plan are eligible; spouses cannot elect coverage if the retiree does not.
- Participants do NOT receive an ID card; they simply need to inform their provider they are covered by VSP and provide their SSN.

Basic Life with AD&D and Supplemental Life Insurance – Securian

- Employees who work a minimum of 30 hours per week. Minimum number of hours can be set at a higher amount by the employer.
 - Retirees can be covered if employers elect to offer Retiree Life coverage.

Dependent Life insurance – Securian

- Spouses and domestic partners* of Employees who work a minimum of 30 hours per week. Minimum number of hours can be set at a higher amount by the employer.
- Children from live birth up to end of calendar year in which they turn 19 or 25, if full-time student
- **NOTE:** spouses who are covered as an employee for basic life of a VBA-participating employer cannot be covered as a spouse for dependent life. In addition, children cannot be covered under both employees' dependent life coverages.

Long Term Disability (LTD) – Lincoln Financial

- Employees working a minimum of 30 hours per week. Minimum number of hours can be set at a higher amount by the employer.

Short Term Disability (STD) – Lincoln Financial

- Employees working a minimum of 30 hours per week; applies to fully-insured plans only

Flexible Spending Accounts – Flexible Benefit Administrators, Inc.

- Employees working a minimum of 20 hours per week. Minimum number of hours can be set at a higher amount by the employer.

Group Critical Illness, Accident & Hospital Indemnity – Securian

- Employees working a minimum of 20 hours per week. Minimum number of hours can be set at a higher amount by the employer.
- Dependents may be covered under the plan.
- Children, up to age 26; coverage ends on the last day of the month they turn 26.

Voluntary AD&D – Securian

- Employees working a minimum of 30 hours per week. Minimum number of hours can be set at a higher amount by the employer.
- Dependents may be covered under the plan.
- Children from live birth up to end of calendar year in which they turn 19 or 25, if full-time student

Group Legal Assistance – MetLife Legal

- Any employee of the employer, assuming cost can be payroll deducted.

Pet Insurance – Nationwide

- Any employee of the employer; premium varies by breed and age and quotes are provided through online website (access through VBA website under Explore Employee Benefits tab)
- 10% discount for VBA participants and if coverage is elected, premium is direct billed to the participant.

***Domestic Partners**

- An employee's dependents do not include Domestic Partners, or their dependent children, unless the employer elects otherwise in their Adoption Agreement.
- Domestic Partners may be defined as:
 - The same sex Domestic Partner of an Employee
 - The opposite sex Domestic Partner of an Employee
- A Domestic Partner relationship will need to be substantiated by the employee and domestic partner by completing an Affidavit of Domestic Partnership.

****Disabled Dependents Over Age 26**

Employees' disabled dependents may continue to be covered under Medical and Dental after age 26 upon verification of disability. Once the verification has been completed, the dependent's demographic profile should be edited to reflect *Disabled* status.

- Medical—Anthem requires a Handicapped Dependent Certification form be completed by a physician to substantiate. Contact the VBA Benefits Corporation to obtain a certification.
- Dental—Does not require a specific doctor's certification and will rely on the dependent's profile in bswift as verification.

PARTICIPATION REQUIREMENTS

The VBA Benefits Corporation sets participation requirements for our member employers primarily due to the contractual requirements set by the insurance carriers.

| COVERAGE | MINIMUM PARTICIPATION REQUIREMENTS |
|--|--|
| Medical & Prescription Drug | 75% participation |
| Medicare Supplement | None |
| Dental | 75% participation |
| Vision | None |
| Basic Life Insurance | 100% participation |
| Supplemental Life | None |
| Dependent Life | None |
| Long Term Disability | 100% participation; employers can fund through LTD flex credits which can create tax-free disability benefit; however, ALL employees must elect and pay for an LTD option. |
| Short Term Disability: Employer-paid (Fully Insured) Voluntary | 100% participation 25% participation |
| Flexible Spending Accounts | None |
| Group Critical Illness, Accident & Hospital Indemnity | None |
| Legal Assistance | None |

BILLING RULES

- The VBA provides a consolidated monthly bill that covers all lines of coverage; we reconcile and remit payment to all carriers.
- The bills are processed on the 23rd of the prior billing month and the bswift system will be down on/around the 23rd of each month for this process. The VBA typically needs a few days to make adjustments before employers can pull the invoice from the bswift system; we will contact employers once the bills are ready to be downloaded.
- The billed amount will be drafted via two ACHs within the first business week of every month for administrative fees and premiums for all coverages.
- We utilize the “wash rule” for new hires, terminations, and changes:
 - If an employee’s coverage is effective on or before the 15th of the month, a full month’s premium will be charged to the employer.
 - If an employee’s coverage is effective on or after the 16th of the month, employers will not be charged a premium.
 - If an employee’s coverage terminated and his/her first day of non-coverage is within the first 15 days of the month, employers will not be billed for that month.
 - If an employee’s coverage terminated and his/her first day of non-coverage is after the 15th of the month, employers will be billed for the entire month.

BENEFIT PLANS TERMINATION DATES

- Medical – employee’s employment termination date or end of the employment termination month (each employer decides)
- Vision – employee’s employment termination date or end of the employment termination month (each employer decides)
- Dental – end of the employment termination month
- Life, Disability and Voluntary AD&D – employee’s employment termination date
- All Voluntary plans – end of the employment termination month

ADMINISTRATIVE RULES & PROCESSES

Medical

- Waiting periods for healthcare coverage may not exceed 90 days under ACA requirements.
- All active employees covered under the medical plans should receive an annual **Creditable Coverage Notice**, which is particularly important when an employee is getting ready to transition to Medicare Part D. An individual may be subject to a penalty if he or she has not had continuous creditable drug coverage since age 65 and prior to application for Part D. Although this is most important for your active employees aged 65 or over, a spouse or disabled child could be Medicare eligible as well. **Important: If you have employees covered under the PPO \$5,000 plan, they should receive the Non-Creditable Coverage Notice. You can find both notices under Forms and Resources on the VBA Benefits website.**

Dental

- The contractual requirement by Delta Dental mandates that the coverage effective date is always the first of the month following your waiting period and the coverage end date is always on the last day of the month following the employee’s termination date.

Life Insurance

- The guaranteed issue amount of life insurance is the lesser of 5x salary or \$500,000, which is the total combined amount for basic and supplemental life. For amounts greater than \$500,000, evidence of insurability (EOI) is required (health questions requested by insurer). Until EOI is approved, life insurance amounts are capped at \$500,000. The VBA will notify you once the amounts have been approved or denied. Note: Annual salary increases are not subject to EOI.
- If an employer offers supplemental life, employees who do not elect coverage at their initial enrollment offering and elect a higher amount of insurance at annual open enrollment will also need to submit evidence of insurability.
- Spouse dependent life is guaranteed issue up to \$30,000. If coverage is not elected at initial enrollment and the participant requests a higher amount of insurance at annual open enrollment, evidence of insurability is required. Spouse life coverage cannot exceed 100% of the employee’s amount of basic and supplemental life coverage.

- All amounts of child dependent life are guaranteed issue at each open enrollment.
- There is a **Waiver of Premium (WOP)** provision in our life insurance contract that allows a disabled employee to continue their life coverages they had in place at the onset of the disability. To be eligible for WOP, the employee must become totally and permanently disabled while under the age of 60.

After the employee has been deemed to be disabled for a period of 9 months, the VBA will be notified by Securian that the individual may be eligible for WOP. Upon notification, the VBA will begin the WOP application with Securian and will notify the employer. The decision to approve or deny WOP must be made within 12 months from the date of disability.

We recommend that you keep the employee's life insurance coverage(s) in force until the waiver determination has been made by the insurance company.

- **Death Claims:** When an employee or covered dependent dies, contact the VBA Benefits Corporation for the appropriate claim forms. A certified copy of the death certificate will be required. All completed claims forms must be returned to the VBA for benefit certification and submission to the carrier.
- When employees terminate employment, basic and supplemental life, as well as dependent life, may be continued as individual policies. Securian will send information directly to all terminated employees outlining their options for continuing coverage. Participants may also utilize Securian's continuation website:

www.lifebenefits.com/continue

Policy Number: 33073

Access Key: VBA

Long Term Disability (LTD)

- If an employee becomes disabled, please give the employee the LTD flyer with directions on how to report a disability claim. This can be found on the VBA website. We recommend this is done once the employee has reached the midpoint of his or her elimination period (does not apply if employer has VBA STD).
- The vendor will send an email to VBA when they receive a new LTD claim form from an employee and may ask for additional documentation regarding annual salary and/or job description.
- When claim has been approved, the VBA will notify the employer; the insurance carrier will notify the disabled employee.
- LTD checks will be mailed directly to the disabled employee; direct deposit can be elected by calling the insurance carrier and requesting the forms.
- If you offer the 70% LTD buy-up option to employees, the additional 10% will be subject to evidence of insurability (EOI) if not elected at initial date of hire. Employees will receive a request for EOI directly from the carrier. The system will pend the election and the VBA will notify you when/if the increase has been approved.

- If you offer multiple LTD plans and an employee elects a plan with a shorter elimination period, such as moving from the 90 to 60-day option, the plan will be subject to EOI if it's not elected at initial date of hire. Employees will receive a request for EOI directly from the carrier. The system will pend the election and the VBA will notify you when/if the plan has been approved.

Short Term Disability (STD)

- When an employee goes out on Short Term Disability, please give them the STD flyer with directions on how to report the absence to the STD carrier. This flyer can be found on the VBA website.
- We do not receive any paper approvals. Banks may log into www.MyLincolnPortal.com and review their specific employees' information.
- STD checks will be mailed directly to the disabled employee.
- Employees who remain disabled longer than their maximum benefit end date will transition to LTD. The STD case manager will transfer the claimant's record to a new LTD case manager.

Group Critical Illness (CI)

- Available at each open enrollment on guaranteed-issue basis.
- Premiums paid on an after-tax basis so benefits will be tax-free and non-ERISA plan.
- When an employee terminates from an VBA participating employer, the coverage may be ported to an individual policy.

Group Accident

- Available at each open enrollment on guaranteed-issue basis.
- Premiums paid on an after-tax basis so benefits will be tax-free and non-ERISA plan.
- When an employee terminates from an VBA participating employer, the coverage may be ported to an individual policy.

Group Hospital Indemnity

- Available at each open enrollment on guaranteed-issue basis.
- Premiums paid on an after-tax basis so benefits will be tax-free and non-ERISA plan.
- No pre-existing condition limitations, including pregnancy, although the first newborn covered under the plan will not have coverage until the first of the month following birth.
- When an employee terminates from a VBA participating employer, the coverage may be ported to an individual policy.

Group Legal Assistance

- Available at each open enrollment.
- Premiums paid on an after-tax basis so benefits will be tax-free and non-ERISA plan.
- Election is for entire plan year; cannot drop coverage mid-year.
- When an employee terminates from an VBA participating employer, the coverage may be ported to an individual policy.

Pet Insurance

- Available at any time by visiting <https://benefits.petinsurance.com/vabankers>
- Premiums are direct billed to employee.

ISSUANCE OF MEMBER ID CARDS

Before a participant becomes active in any of the plans, the carriers must first receive our Bswift file which is sent to the carriers on a weekly basis. Therefore, it may take up to 10 business days before the participant's profile is accessible on the various carrier platforms. Once their profiles are activated, Member ID cards are sent in the mail. *As a reminder, there are NO ID cards issued for Vision. The participant simply needs to inform their provider they are covered by VSP and then provide their SSN.*

There are occasions where the participants may need their Member ID cards before receiving them in the mail. If this is the case, we encourage the participants to reach out to the carrier directly, provided of course there has been adequate time for the data to be uploaded into the carrier's system. HR Administrators may also request copies by sending an email to benefits@vabankers.org.

Once participants have received their Member IDs, it is highly recommended they download Anthem's Sydney app. Having the app will enable them to download digital ID cards as well as monitor their claims.

AFFORDABLE CARE ACT (ACA) COMPLIANCE

Employer ACA Requirements

- Employer PCORI Fee and Taxes – VBA will pay on your behalf to the IRS.
- Affordable Coverage: Employee contribution for lowest cost health plan cannot be more than 8.39% of taxable income in 2024.
- Sufficiently Valuable Coverage: VBA's health & welfare consultant has verified all VBA plans meet the 60% actuarial value threshold.
- Minimum Essential Coverage: VBA's plans provide minimum essential coverage.

Employer ACA Reporting Requirements

- Minimum Essential Coverage (MEC) Reporting (Code 6055) – requires reporting by health insurers and self-funded employers to enforce individual mandate. VBA will complete on behalf of employers in plan creating the appropriate 1095-B forms which will be accessible through the bswift system.
 - Form 1095-B is used to report certain information to the IRS and to taxpayers about individuals who are covered by minimum essential coverage and therefore are not liable for the individual shared responsibility payment.
- Employer Mandate Reporting (Code 6056) – requires reporting by employers with more than 50 FTEs (Applicable Large Employers or ALE) to enforce Employer Mandate and eligibility for premium credit. Each ALE is responsible for the distribution of 1095-C forms.
 - Form 1095-C is filed and furnished to any employee of an Applicable Large Employers (ALE) member who is a full-time employee, as defined by the Affordable Care Act, for one or more months of the calendar year. ALE members must report that information for all twelve months of the calendar year for each employee.
- Health Insurance Marketplace Notice – New hires should be provided with a copy of the notice at time of hire. This is a one-time requirement and not required to be reissued annually. *Updated notice on VBA Benefits website.*

HIPAA COMPLIANCE

The VBA Benefits Corporation is HIPAA-compliant and serves as HIPAA officer for most of our employers which allows you to remain separated from receiving detailed claims information or protected health information (PHI). We maintain all HIPAA-related documents, including HIPAA Policy, Privacy Compliance Manual, and Business Associate Agreements (BAAs) with our vendors.

We have traditionally found this saves our employers/associate members time and money in having us take on this role.

We receive assistance from our outside legal counsel, Williams Mullen, to review and update our policies and procedures, and documents to ensure we are compliant with the law.

COBRA

We include COBRA administration for those employers who participate in our medical, dental, vision and health FSA plans. The COBRA vendor, Flexible Benefit Administrators (FBA), receives weekly files from bswift with information on new hires and terminations. Important reminders include:

- When you add new hires, the vendor will mail an Initial Rights notice to their home addresses.
- When employees are terminated, the vendor will mail a COBRA qualifying event election packet to the last home address in the bswift system.
- When a dependent becomes ineligible, a COBRA notice will automatically be generated and mailed.
- HR administrators should communicate to terminating employees or ineligible dependents that the COBRA vendor will be mailing a COBRA election packet to their home address and the cost is based on the entire premium (both employer and employee portion) plus a 2% COBRA administration fee.
- HR administrators may request admin access to FBA's COBRApoin where they can access electronic copies of the COBRA communications that are sent to their former participants.

General COBRA rules apply after a qualifying event:

- Employee and qualified dependents can elect coverage for up to 18 months
- Under certain circumstances, dependents who become ineligible (for example, dependents who have aged out) can elect coverage for up to 36 months
- Disabled employees can elect coverage for up to 29 months

For detailed information about COBRA, please refer to the Wrap Health & Welfare Summary Plan Description, customized to your plan offerings, provided by the VBA.

EAP

The EAP model includes four visits to a mental health provider; this creates a health plan which means that terminated members must be offered COBRA rights. Since the VBA administers COBRA for our plan participants, we can only meet COBRA obligation requirements for medical plan enrollees. For employees who waive medical coverage, and if an employer offers our disability plan, an EAP can be offered through our disability carrier, Lincoln Financial. Information is available on the VBA website.

ANNUAL DISCLOSURE REQUIREMENTS

| Notice | Explanation | Entity Responsible/ Applicable Document | Frequency | Delivery Requirements** |
|--|---|---|--|--|
| Summary of Benefits and Coverage (SBC) | Four-page uniform description of benefits available at open enrollment. Anthem will provide SBC, banks must distribute to eligible employees. Follow the same distribution guidelines as SPDs. Electronic distribution is acceptable within specific parameters. Paper copies must be available upon request. | VBA provides SBCs to bank; Bank will distribute/post to employees | Annual (during open enrollment period); for newly eligible, must be distributed first day of enrollment eligibility. Typically, available on October 1 of each year. | Electronic distribution acceptable |
| Patient Protection Disclosures | Participants may select any participating provider available to accept them as a patient. A child may elect a provider specializing in pediatric care. Obstetrical or gynecological care may be obtained without a referral or prior authorization. | Anthem includes in booklet-cert; Bank should notify employees of availability | Not defined as annual distribution; must be included with an SPD or other similar description of benefits | Electronic distribution acceptable under guidelines of SBC |
| HIPAA Special Enrollment and Pre-existing Condition Exclusion Notices | Eligible participants must receive notice of special enrollment rights. Pre-existing condition not applicable to VBA plan. | Anthem includes in booklet section labeled "When You Enroll" | Annual (during open enrollment period); for newly eligible, must be distributed at enrollment eligibility | Email and other internet-based methods are acceptable |

| Notice | Explanation | Entity Responsible/ Applicable Document | Frequency | Delivery Requirements** |
|---|---|---|---|--|
| Women’s Health and Cancer Rights Act (WHCRA) Notice | Requires annual notice to all participants and beneficiaries regarding rights to post-mastectomy breast reconstruction. One notice at initial enrollment, annually thereafter. | Anthem distributes to new participants with ID cards; will also be included in booklet for annual notice. | Annual | Electronic distribution acceptable |
| ACA Form 1095-C | Serves as evidence of compliance with the Affordable Care Act’s reporting requirements. | Employers who have 50 or more FT or FT equivalent employees. VBA posts to bswift site. | Annual | Electronic distribution acceptable. Hard copies should be sent via USPS to termed employees. |
| ACA Form 1095-B | Serves as evidence that Minimum Essential Coverage (MEC) was provided to by the employer. | Employers who have 50 or more FT or FT equivalent employees. VBA posts to bswift site. | Annual | Electronic distribution acceptable. Hard copies should be sent via USPS to termed employees. |
| Medicare Part D Creditable (or Non-Creditable) Coverage Notice | Employers must provide notice if prescription drug coverage is creditable (i.e. at least actuarially equivalent to Medicare’s standard Rx benefit). Required recipients are Part D-eligible who are “enrolled or seeking to enroll” in the employer’s plan. | VBA posts to website; Bank should distribute at open enrollment | Must be provided on or before October 15 of each year and following any changes in creditable coverage status | Electronic distribution is acceptable; however, paper is recommended. |
| Children’s Health Insurance Program (CHIP) Notices | Applicable in a state that provides a premium assistance subsidy under Medicaid or CHIP. Must provide in VA. | VBA posts to website; Bank should distribute at open enrollment in a separate and “prominent” document. | Annual (during open enrollment period) <i>Current notice expires: January 31, 2026</i> | Electronic distribution acceptable; must be presented as a separate and prominent document |

| Notice | Explanation | Entity Responsible/ Applicable Document | Frequency | Delivery Requirements** |
|--|---|--|---|------------------------------------|
| Wellness Program Notices | If a wellness program requires individuals to meet a standard related to a health factor in order to obtain a reward, the HIPAA nondiscrimination rules require the program to comply with five conditions, including a disclosure requirement. | May apply based on individual banks' specific wellness plans if outcomes-based incentives are offered to employees | Effective first day of plan year | Electronic distribution acceptable |
| Summary Annual Report (SAR) | Must be distributed within nine months after the close of each plan year. If an extension is filed for the plan's Form 5500, the SAR deadline is also extended. | VBA provides to bank with all plans offered; bank must customize to specific benefits offered and distribute. | Annual | Electronic distribution acceptable |
| Health Insurance Marketplace Notice Requirement | Employers covered by the Fair Labor Standards Act (FLSA) are required to provide notice either electronically or in hard copy. | VBA posts sample notice on website; Bank completes and distributes to new hires | At time of hire <i>Current notice expires: December 31, 2026</i> | Electronic distribution acceptable |

OTHER DISCLOSURE REQUIREMENTS

| Notice | Entity Responsible | Frequency | Delivery Requirements** |
|---|---|---|---|
| Initial COBRA QE Notice | FBA | Within 90 days of EE enrollment | Electronic distribution acceptable but not recommended. |
| HIPAA Notice of Privacy Practices | VBA will post on website; Bank will distribute to new hires and redistribute if revised | Reminder must be distributed every three years regarding availability of detailed description. <i>Last Updated: September 1, 2022</i> | Electronic distribution acceptable |
| Summary Plan Description (SPD) | VBA will distribute customized SPD to Bank; Bank will distribute to employees | VBA will update customized wrap Flex Plan SPDs each year based on new plan offerings. Booklet-certificates are provided on VBA website and are part of the SPD requirement. Employees must receive SPD within 90 days of EE enrollment and again every five years | Electronic distribution acceptable |
| Summary of Material Modification (SMM) | VBA will distribute to Bank; Bank will distribute to employees | Explains plan change for participants (without need to update full SPD). Must be distributed within 210 days after effective date of change. | Electronic distribution acceptable |

**General Rules for Electronic Distribution:

- For employees with work-related computer access: an employer may distribute documents and notices electronically without obtaining employee consent.
- For individuals without work-related computer access: an employer must provide paper copies of documents and notices, unless the employee affirmatively consents to electronic distribution beforehand and provides an electronic address.