

Your Self-Funded Medical Plan Compliance Checklist

A quick-reference guide to the federal notices, filings, and disclosures that apply to your self-funded medical plan.

Prepared by Arcwood Benefits Consulting

Primary Federal Requirements

The items below are the primary federal requirements we want you to be aware of.

REQUIREMENT	APPLIES TO YOUR PLAN?	TRIAD HANDLES?
ACA 1094-B / 1095-B Reporting	✓ Yes	✓ Yes
PCORI Fee	✓ Yes	✓ Yes
Section 105(h) Testing	✓ Yes	✓ Yes
Medicare Part D	✓ Yes	✓ Yes
HIPAA Privacy & Special Enrollment Rights	✓ Yes	✓ Yes

Additional Compliance Items

Notice, disclosure, and reporting items that may apply depending on your plan design and location.

REQUIREMENT	APPLIES TO YOUR PLAN?	TRIAD HANDLES?
Summary of Benefits & Coverage (SBC)	✓ Yes	✓ Yes
Summary Plan Description (SPD)	✓ Yes	✓ Yes
WHCRA	⚠ Yes, if applicable to the medical plan	✓ Yes
NMHPA	✓ Yes	✓ Yes
CHIPRA Notice	⚠ If applicable based on employee residence	✓ Yes
COBRA / State Continuation	⚠ State-specific	⚠ Where applicable / confirm with TPA
RxDC Reporting	✓ Yes	⚠ Confirm with TPA/PBM
Gag Clause Attestation	✓ Yes	⚠ Confirm with TPA
Transparency in Coverage	✓ Yes	⚠ Usually TPA/vendor
No Surprises Act	✓ Yes	⚠ Usually TPA/vendor
ACA Marketplace Notice	⚠ Generally applicable	– Employer
Section 125 / Premium Only Plan	⚠ If employees pay premiums pre-tax	– Employer

✓ Applies / handled
⚠ Depends / confirm details
– Employer-handled

Note: This checklist is a general summary for planning purposes and does not constitute legal advice. Applicability can vary by plan design, funding structure, and employee location — confirm specifics with your TPA, PBM, and benefits counsel.