

# Health Care Reform Alert: Update: U.S. Department of Labor Issues Model Notices Applicable to Child Coverage, Annual Limits, and Patient Protection

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By [Patricia Moran](#)

The United States Department of Labor has issued model notices, available at <http://www.dol.gov/ebsa/>, to assist health plan sponsors and health insurance issuers implement the following requirements of the Patient Protection and Affordable Care Act of 2010, together with the Health Care and Education Reconciliation Act of 2010 (collectively, the “Act”):

1. **Child Coverage.** Effective for plan years beginning on or after September 23, 2010, a plan or issuer that makes available dependent coverage of children must make such coverage available to children until the attainment of 26 years of age. Plans must provide a notice of the enrollment opportunity to individuals whose coverage ended, or who were denied coverage (or were not eligible for coverage) under a group health plan or health insurance coverage because, under the terms of the plan or coverage, the availability of dependent coverage of children ended before the attainment of age 26. The notice must be provided not later than the first day of the first plan year (in the individual market, policy year) beginning on or after September 23, 2010. For more information on these requirements, please see our [May 13, 2010 Advisory](#).
2. **Annual Limits.** Effective for plan years beginning on or after September 23, 2010, the Act prohibits group health plans and group or individual health insurance issuers from imposing lifetime limits on the dollar value of health benefits. Individuals who reach a lifetime limit under a plan or health insurance coverage prior to the effective date and are otherwise still eligible under the plan or health insurance coverage must be provided, no later than the effective date, with (1) a notice that the lifetime limit no longer applies and (2) an enrollment or reinstatement opportunity. For more information on these requirements, please see our [June 30, 2010 Alert](#).
3. **Patient Protection.** Effective for plan years beginning on or after September 23, 2010, the Act establishes new requirements relating to the choice of a health care provider. A plan must give notice of these new requirements whenever the plan issues an summary plan description or other similar description of benefits. These rules do not apply to grandfathered plans. For more information on these requirements, please see our [June 30, 2010 Alert](#).

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*For further information regarding this or any issue related to Health Care Reform, please contact one of the professionals listed below or the Mintz Levin attorney who ordinarily handles your legal affairs.*

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