

Weekly Digest

• June 30, 2026 •

EMPLOYEE
BENEFITS

CMS Issues 2027 HHS Notice of Benefit and Payment Parameters Final Rule

"The final policy may impact health plans that are not directly required to provide EHB, such as self-insured group health plans and large-group market fully insured plans that must follow the annual and lifetime dollar-limit restrictions on EHB and annual cost-sharing limitation requirements. The final policy is consistent with CMS' desire to provide the 'regulatory framework' for innovation, without mandating it. Issuers should plan to follow the timelines as outlined by their State and CMS. This policy is subject to litigation in Columbus II." [Full Article](#)

Groom Law Group



Navigating the Proposed Rule on Stand-Alone Fertility Benefits: Guidance for Employers

"Immediate actions (before final rule): [1] Inventory existing fertility benefits [2] Assess state requirements. Planning (once final rule is published): [1] Decide whether to adopt excepted fertility benefits [2] Choose a delivery structure [3] Set benefit parameters [4] Prepare required participant notices [5] Review summary plan descriptions (SPDs) and plan documents [5] Coordinate with benefits counsel on tax treatment." [Full Article](#)

Bryan Cave Leighton Paisner, LLP

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New PBM Disclosure Rules: DOL Proposal Meets CAA 2026

"The DOL proposed rule (if finalized) and CAA 2026 encourage transparency and accountability between plan sponsors/fiduciaries and PBMs. With detailed initial and semiannual disclosures, drug-level pricing transparency, and enforceable audit rights, plan sponsors and fiduciaries can: [1] Compare PBM models and evaluate which approach delivers the best value. [2] Identify spread pricing exposure at the individual drug level. [3] Attempt to negotiate transparent pass-through compensation arrangements." [Full Article](#)

Nixon Peabody



What Is the Employer's Role in a Voluntary Plan Safe Harbor Arrangement? (PDF)

"For a voluntary plan arrangement to fall within the safe harbor, the employer's role is strictly limited by DOL regulations. Specifically: [1] [The employer] cannot require or coerce employees to participate [2] The employer cannot make any contributions to the plan [3] The employer's functions are limited [4] Employers cannot endorse the plan [5] Employers may not receive any consideration from the insurer." [Full Article](#)

Thomson Reuters/ EBIA

Provider Networks and Out-of-Pocket Costs Drive Health Plan Choice (PDF)

"Provider networks were the most important factor when choosing a health plan, outranking premiums and other plan features. Traditional plan enrollees placed greater importance on lower out-of-pocket costs when receiving care, while high-deductible plan enrollees placed greater importance on lower premiums. Prescription drug coverage increased in importance compared with prior years." [Full Article](#)

Employee Benefit Research Institute (EBRI)



Trump Accounts Get an ERISA Pass: Practical Implications of the DOL's New Guidance

"The authors expect that most employers who are interested in establishing Trump account contribution programs intend to do so through a pre-tax salary-reduction feature under a cafeteria plan and/or by providing what has been referred to as a 'match' of the \$1,000 seed money provided to the Trump accounts of eligible children born between 2025 -2028, which is an employer contribution. For the most part, [in [Technical Release 2026-02](#)] DOL has clarified its view that ERISA does not apply to these arrangements." [Full Article](#)

Thompson Hine, LLP