

This presentation is directed towards governmental school districts and does not contain information that might apply to other types of employers.

Cafeteria Plans

*Rhonda A. O'Brien, Esq.
Lashly & Baer, P.C.
714 Locust Street
St. Louis, Missouri 63101
Tel: 314-621-2939; 314-436-8336
Fax: 314-621-6844
raobrien@lashlybaer.com*



LASHLY & BAER, P.C.
ATTORNEYS AT LAW

What Is a Cafeteria Plan?

- Arrangement authorized by IRC §125. Also known as a "flexible benefits" program
- Created by Employer
- Employees choose from a compensation menu including taxable and certain nontaxable benefits (Qualified Benefits)



Qualified Benefits Permitted Under a Cafeteria Plan

- Premium conversion (POP)
- Employer-provided health coverage (Code §105 or 106)
- Flexible spending accounts (FSA)
- Dependent care (Code §129)
- Group-term life insurance (However, in excess of \$50,000 can result in gross income to insured employee.)
- AD & D insurance (Code §106)
- STD and LTD insurance (Code §106)
- Adoption assistance (Code §137)
- Health Savings Account (HSA) contributions (Code §233)
- School Systems only can provide fully prepaid post-retirement term life insurance.



Taxable Benefits

- Cash
- Taxable benefits

Example: PTO e.g. vacation, sick and personal days) . But , Plan must require that employee receive cash for, use or forfeit PTO before the last day of the Plan Year to which the elective contributions relate.



Eligibility

Cafeteria Plans may provide benefits to:

- Employees
- Former employees such as retirees. But not primary purpose.



Value to Employees

- Advantages:
 - No federal income tax or FICA or Medicare tax
 - Generally, no state or city tax
 - Flexible choices among benefits (or cash)
 - Increased take-home pay (vs. after-tax payment)
- Disadvantages
 - Irrevocable elections
 - Use-it-or-lose-it rules
 - Possibly lower Social Security benefits



Value to Employers

- Advantages:
 - No Employer share of FICA or Medicare tax
 - Shift coverage costs to employees who pay through salary reductions
 - HSA contributions not subject to HSA comparability (nondiscrimination rules)
- Disadvantages for employers:
 - Set-up and administrative costs
 - Health FSAs subject to Uniform Coverage Rules



Plan Contributions

- Salary reduction agreements.
Employee accepts reduced salary with the difference (which is pre-tax) used to purchase benefits.
- Employer contributions.
- Some Plans allow employee after-tax contributions (rarely).



LASHLY & BAER, P.C.
ATTORNEYS AT LAW

Deferred Compensation Prohibition

- Benefit options cannot result in deferral of compensation.
- One year's plan contributions cannot be used to purchase benefits in another year.
- Exceptions:
 - HSA contributions
 - Certain Grace periods (up to 2 ½-mos. after end of plan yr.)
 - LTD policy
 - Advance payments for orthodontia
 - Year end salary reduction may pay premiums at beginning of next year



LASHLY & BAER, P.C.
ATTORNEYS AT LAW

Cafeteria Plan Document Requirements

- Required written plan document describing:
 - Eligibility for Participation Rules
 - Available Benefits; Period of Coverage
 - Benefit Election Procedures
 - How Contributions are Made
 - Maximum Employer contribution per participant (if any),
 - Maximum Employee elective contribution (salary reduction)
 - The Plan Year
- The Plan must be:
 - Operated in accordance with terms in the document
 - Adopted and effective on or before first day of plan year



Enrollment and Election Rules

- Generally, elections must be made before beginning of coverage period (generally 12 mos.)
- New hires may be allowed to make initial elections within 30 days, retroactive to date of hire. However, all pre-tax amounts must be taken from future pay
- Electronic elections are permissible



“Negative” elections are permitted

- May be “automatic” – if enrolled in health plan, premiums must be pre-tax
- May be “default” – if enrolled in health plan, premiums will be pre-tax, unless employee elects after-tax
- May be “evergreen” – renewed from year to year unless changed (less common with FSAs)



Enrollment and Election Rules

- Generally, elections are irrevocable for the Plan Year
- Exceptions to irrevocability are specified in IRS regulations; exceptions must be described in the Plan document



Exceptions to Irrevocability of Elections

- Change in status events
 - Birth, adoption, marriage, divorce, leave of absence, strike, lockout, change of worksite
 - Election change must be “consistent with” change in status
 - ✓ Limits who may add or drop coverage
 - ✓ Timely request to change required (though no specific deadline)



Exceptions to Irrevocability of Elections

- HIPAA special enrollment events
 - Substantial overlap with status changes
 - Two new events under “CHIPRA”;
 - ✓ Loss of eligibility for CHIP or Medicaid
 - ✓ Entitlement to premium subsidy under either program
 - May allow even unaffected dependents to be enrolled at same time (i.e., no “consistency” requirement)
 - Specific timeframes for enrollment
 - ✓ Generally must request change within 30 days
 - ✓ 60 days for CHIPRA events



Exceptions to Irrevocability of Elections

- Cost changes
 - If “insignificant” may automatically adjust pre-tax premiums
 - If “significant” may allow election change
 - Not applicable to FSAs
- Coverage changes
 - If “significant” may allow move to other option
 - If change amounts to “loss of coverage” may allow revocation of election
 - Not applicable to FSAs



Exceptions to Irrevocability of Elections

Court Orders:

- May allow employee to add dependent child or foster child if employee is ordered to cover child
- May allow employee to drop child from coverage if other parent is ordered to cover child and in fact does so



Exceptions to Irrevocability of Elections

Medicare or Medicaid

- Employee may be allowed to drop coverage for self or dependent upon becoming entitled to Medicare or Medicaid

- Similarly, employee or dependent who loses Medicare or Medicaid coverage may be allowed to enroll



Employees on FMLA Leave

- Employee:
 - Must be allowed to continue health coverage at active-employee premium
 - Must be allowed to revoke coverage
 - Employer:
 - May waive employee premium payments while on unpaid leave (on a nondiscriminatory basis)
 - May offer employee premium payments under 3 options:
 - ✓ Prepay
 - ✓ Pay-as-you-go
 - ✓ Catch-up
- Must be consistent with offering to employees on non-FMLA leave



Nondiscrimination Tests

“Highly Compensated Individuals” and/or Key Employees (as applicable) are taxed on the maximum taxable benefit they could have elected to receive if the Plan discriminates.

First Test: Cafeteria plans may not discriminate in favor of “highly compensated individuals” as to eligibility, contributions, or benefits.

“Highly compensated individuals” include: officers, employees who are highly compensated based on facts and circumstances (e.g. earning at least \$110,000 in 2011) and Spouses of the foregoing



Nondiscrimination Tests

Second Test: Key Employee Concentration Test: “Key Employees” may not receive more than 25% of the Plan’s total non-taxable benefits.

“Key Employees” include officers earning more than \$160,000, subject to a limit on number of officers.



Nondiscrimination Rules

- “Safe harbor” rule for premium-only plans
All employees can participate and can elect the same salary reductions for the same benefits.
- Underlying Benefits May Be Subject To Other Nondiscrimination Tests
Dependent care – §129;
Medical Reimbursement §105;
Group Term Life §79



Flexible Spending Accounts

- Health FSAs may reimburse medical expenses. But not premiums.
- Dependent Care Assistance FSAs – may reimburse dependent care expenses if no tax credit is claimed
- Adoption Assistance FSAs – may reimburse adoption expenses if no tax credit is claimed



Special FSA Rules

- All FSAs subject to
 - Substantiation requirements
 - Use-It-or-Lose-It” rule, although
 - DFSAs and adoption assistance FSAs may allow for “spend-down”
 - Any FSA may allow for 2 ½ mos. grace period



Special Health FSA Rules

- Uniform Coverage Rule -
Maximum reimbursement must be available,
reduced by use
- May allow qualified reservist distributions
- Existence may negate ability to maintain HSA -
Coordination is necessary
- Limited COBRA may apply



Health Care Reform: Health FSAs (and HSAs)

- 2011 –HFSAs and HSAs
 - No reimbursements for OTC drugs (other than insulin) unless prescribed
- 2013 -Health FSAs contribution
 - Annual salary-deferral limit of \$2,500 (indexed for inflation)
- 2010 -Cover Children – up to age 27



Health Care Reform Safe Harbor "Simple" Cafeteria Plans

- Deemed to satisfy Cafeteria Plan and certain component benefit nondiscrimination rules, such as
 - ✓ Group-term life insurance
 - ✓ Self-insured medical coverage
 - ✓ Dependent care assistance
- To be eligible, employer must:
 - Average 100 or fewer employees during past 2 years
 - Make minimum non-elective contribution for each eligible employee



***Simple Plan Employer Contribution Requirements
for Each Qualified Employee***

- Uniform percentage (not less than 2%) of comp.

Or

- At least 6% of comp. or twice the salary reduction contributions of each employee, whichever is less. And, the rate of contribution to any salary reduction contribution of a HCE or Key Employee can not be greater than the rate to any other employee.



Thank You

Questions

Rhonda A. O'Brien, Esq.

Lashly & Baer, P.C.
714 Locust Street · St. Louis, MO 63101
Phone: 314.621.2939

E-mail: raobrien@lashlybaer.com

www.lashlybaer.com

