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On June 26, 2013, the Supreme Court held that same-sex marriages valid under state law are recognized at the federal level. Additional guidance has been issued and more is needed and expected to truly understand the implications for health and welfare plans.

In the latest guidance, on March 14, 2014, the Centers for Medicare & Medicaid Services ("CMS") indicated that, beginning with the 2015 plan or policy year, health insurers offering non-grandfathered health coverage for opposite-sex spouses cannot decline to offer to an employer the option to cover same-sex spouses. This guidance does **not** require a group health plan to provide coverage that is inconsistent with the terms of eligibility for coverage under the plan, or otherwise interfere with the ability of an employer to define a spouse for purposes of eligibility for coverage under the plan. Instead, this guidance prohibits an issuer from choosing to decline to offer to an employer (or individual in the individual market) the option to cover same-sex spouses under the coverage on the same terms and conditions as opposite sex-spouses.

This guidance does not apply to self-funded plans. In addition, state insurance laws may impose coverage requirements on carriers that is more generous.

For the guidance, visit: <http://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/Downloads/frequently-asked-questions-on-coverage-of-same-sex-spouses.pdf>.