

Appendix II: Crosswalk of Changes
Limited Wraparound Coverage Reporting
(CMS- 10571/OMB control number 0938-NEW)

Section Edited	Revision (Changes indicated in red)	Rationale
Purpose of this Form	Edited to say "...Employee Retirement Income Security Act of 1974 (ERISA)....."	Edited for accuracy
Section I	Edited to say "Fill out one form per Limited Wraparound Coverage plan. "	Edited for accuracy
Section 4, Part I, line 1(b)	Added " Plan Sponsors of plans that are not subject to ERISA and that do not have plan identification numbers should create a sequential number for each Limited Wraparound Coverage for which the Form is submitted. "	Clarification added to address comment that non-ERISA plans do not have plan identification numbers.
Section 4, Part I, line 2(a)	Added " If this plan covers the employees of multiple employers, enter the name of the Plan Sponsor. "	Clarification to address comment that plan may cover multiple employers.
Section 5, Part I, 2.b.	Edited to say "Plan Sponsor's Employer Identification Number (EIN)"	Edited for accuracy.
Glossary – Additional Benefits	Edited to say "Examples include, but are not limited to:"	Edited for accuracy.
Glossary - Full-time employee	Edited to say " Full-time employee means (1) for Limited Wraparound Coverage offered in connection with Eligible individual health insurance and/or BHP coverage: an employee who is reasonably expected to work an average of at least 30 hours of service per week; and (2) for Limited Wraparound Coverage offered in connection with a MSP: an employee who is employed an average of at least 30 hours of service per week with an employer who is not in a limited non-assessment period for certain employees, as defined in 26 C.F.R. § 54.4980H-1(a)(26). See 26 C.F.R. § 54.4980H-1(a)(21). "	Edited for accuracy.