

# Coronavirus Update

## Extended Deadlines for Health Plans

On April 28, 2020 the Department of Labor (DOL), Internal Revenue Service (IRS) and Treasury Department issued a joint notice extending certain timelines for plan participants and beneficiaries to make critical health coverage and other decisions affecting benefits due to COVID-19. In general, as related to health care, the joint notice affects COBRA, special enrollment, claims, appeals and external reviews. Below is a brief overview of how the guidance impacts ERISA plans.

| Action  | Normal Deadline  | Extension / Relief Provided  |
|---|--|--|
| Requesting special enrollment in an employer-sponsored group health plan  | 30 days (or 60 days when applicable) from the occurrence of the Qualifying Event | Up to 30 days (or 60 days when applicable) following the Outbreak Period End Date* |
| Electing COBRA continuation coverage under a group health plan  | 60 days following the date on which coverage terminates                          | Up to 60 days following the Outbreak Period End Date*                              |
| Initial COBRA monthly premium payment   | 45 days following the date of the initial COBRA election                         | Up to 45 days following the Outbreak Period End Date*                              |
| Subsequent COBRA monthly premium payments   | 30 days from the beginning of each calendar month                                | Up to 30 days following the Outbreak Period End Date*                              |
| Filing a benefit claim under the plan's claims procedure  | The deadline determined in accordance with the terms of the plan                 | Up to the plan-designated deadline, following the Outbreak Period End Date*        |
| Appeal an adverse benefit determination under a group health plan   | 180 days following receipt of the adverse benefit determination                  | Up to 180 days following of the Outbreak Period End Date*                          |
| Request for an external review of an adverse benefits determination for claims under non-grandfathered group health plans | 4 months following receipt of the adverse benefit determination                  | Up to 4 months following the Outbreak Period End Date*                             |

\*To determine the length of the extension, group health plans subject to ERISA or the Code must disregard the period from March 1, 2020 until sixty (60) days after the announced end of the National Emergency or such other date announced by the Agencies in a future notification (the "Outbreak Period") related to the periods and dates above.

**Questions?** For assistance, please contact **HealthComp Customer Service** at **1-800-442-7247**.

This alert should not be construed as legal advice or a legal opinion on any specific facts or circumstances. The contents are intended for general informational purposes only, and you are urged to consult your attorney concerning any particular situation and any specific legal question you may have.