

COVID-19 Resource Guide for Human Resources Professionals Action Items and Implementation Guidelines Relating to Employee Benefit Plans

Provision	Legislation / Guidance	Effective Date(s)	Employer Action Required	Notes to Employers			
	Health and Welfare Plans						
Coverage of Diagnostic Testing for COVID-19 Group health plans and health insurance issuers offering group or individual health insurance coverage must cover FDA- approved COVID-19 testing (including in vitro testing) along with health care items and services necessary for the tests, without any cost-sharing, prior authorization, or medical management requirements. HSA tax-advantaged contributions are not affected by the new COVID-19 testing requirements. Testing at an on-site medical clinic or through an employee assistance program may be provided without jeopardizing excepted benefit status.	FFCRA (as amended by the CARES Act)	3/18/20 –7/25/20, unless extended by HHS	Plan or policy should be amended if the plan or policy does not contain a catch-all provision automatically including any legally required coverage. Summary of Material Modifications (SMM) and Summary of Benefits and Coverage should be distributed as soon as reasonably practicable.	The coverage required by this provision is only temporary at the moment, but could be continued voluntarily by insurers or self-insured plan sponsors as a matter of plan design beyond the requirement's end date. See " Expansion of COVID-19 Care Services " below addressing this optional plan design with respect to HSA- qualifying HDHPs. Guidance does not reflect any state-specific additional standards or requirements on health insurance issuers relating to COVID-19.			

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Applicable to services provided by out-of-network providers at the cost listed by provider on a public website or as negotiated by plan with the provider.				
Expansion of COVID-19 Care Services Unless and until further guidance is provided to the contrary, HSA- qualifying HDHPs may provide COVID-19 treatment (and testing beyond the above-noted mandated coverage period) with no deductible or reduced deductible without destroying HSA tax- advantaged contributions.	IRS Notice 2020-15; IRS Notice 2020-29	1/1/20	Plan amendment and SMM may be required. Contracts with carriers should be updated accordingly.	Although all group health plans (including HSA- qualifying HDHPs) must provide coverage for COVID-19 testing without any participant cost sharing during the period 3/18/20 through the end of the public health emergency declared by the HHS (which is currently scheduled to expire on 7/25/20), employers may choose to design their HSA-qualifying HDHPs to provide coverage for COVID-19 testing at reduced or no cost sharing from 1/1/20 through 3/17/20 and after 7/25/20 without affecting HSA tax-advantaged contributions. Employers may similarly choose to design their HSA-qualifying HDHPs to provide coverage for COVID-19 treatment at reduced or no cost sharing beginning 1/1/20. This provision applies until further guidance is issued.



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Expansion of Telehealth and Remote Health Care Services HSA-qualifying HDHPs may provide telehealth or other remote health care services for all medical conditions (not just COVID-19) with no deductible or reduced deductible without destroying HSA tax-advantaged contributions.	CARES Act; IRS Notice 2020-29	1/1/20	Plan amendment and SMM may be required. Contracts with carriers should be updated accordingly.	This provision only applies to telehealth services provided in plan years beginning on or before 12/31/21.
Over the Counter Medications HSA, HRA, and health FSA participants may be reimbursed for over the counter medical products, without a prescription. Expanded definition of medical products includes menstrual products.	CARES Act	Expenses incurred after 12/31/2019	This change will automatically apply to HSAs but HRAs and health FSAs will need to be amended if the plan includes a provision limiting OTC reimbursements to prescription medications. If, on the other hand, the plan refers to a list of eligible expenses, it will not need to be amended since the updated list will reflect	This is a permanent change. SPD language should be reviewed to determine whether an SMM or other employee communication should be issued.





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			expanded definition.	
COVID-19 Vaccination Group health plans and health insurance issuers offering group or individual health insurance coverage must cover COVID-19 vaccination without any cost- sharing.	CARES Act	15 days after CDC recommends coverage	Plan amendment and SMM may be required to reflect earlier coverage effective date.	This provision accelerates the normal one year deadline by which newly recommended preventive services have to be covered.
Furlough, Layoff or Other Actions Taken by Employer Many employers have or will make the difficult decision to furlough, layoff, or reduce employee hours. Raises eligibility questions under the following types of health and welfare benefits: health insurance, STD, LTD, long-term care, life insurance, EAP, dependent care, health FSA.	ERISA; COBRA; Internal Revenue Code; IRS Notice 2020-29	Prior to the effective date of employer action	Review plan document to see how affected employees are to be treated under the plan. Amend the plan as necessary to provide desired level of coverage. Confirm coverage with insurers (or stop-loss carrier if self-insured). Offer COBRA as required.	Employer's determination of full-time status under the ACA may determine furloughed or reduced hours employee's eligibility for group health benefits. "Active at work" or minimum hours requirements may determine eligibility for other welfare benefits. Warning, employers may face a tax penalty if employee maintains full time status but health insurance is not affordable and employee receives subsidized coverage through individual Marketplace. Furloughed and reduced hours employees may be eligible for COBRA if they lose coverage due to reduction in hours. If employer subsidy will be offered, COBRA election notice will need to be tailored and plan amendment may be needed (depending upon plan terms); discrimination will also need to be addressed for any COBRA



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			Determine whether mid-year election changes are permissible due to change in status. Note that employers may choose to disregard otherwise applicable mid- year election change restrictions with respect to health FSAs and dependent care FSAs for the 2020 calendar year. (See "Permissible Cafeteria Plan Election Changes" below.) If coverage will continue for furloughed or reduced hour employees, determine if employees will be responsible for	subsidy offered for self-insured group health coverage. An employer COBRA subsidy for less than the entire maximum COBRA coverage period may also impact an employee's ability to enroll in other health coverage, including individual Marketplace coverage, at the end of the COBRA subsidy period. Consider impact on ACA compliance, including Rule of Parity, monthly full-time counts, and future tracking of ALE status.



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			premiums and how any required premiums will be collected (e.g., on a pre-tax basis (where applicable) from compensation paid prior to or after the furlough, or on an after-tax basis during the furlough). Note that in order to preserve any ERISA exemption for voluntary employee paid insurance arrangements, employers cannot contribute toward the cost of those benefits.	





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	401(k) and P	rofit Sharing, 403(a) and (b), 457 Plans	and IRAs
 Expansion of In-Service Plan Distributions and Termination Distributions Qualified participants, including qualified participants who have terminated employment, may take a "coronavirus-related distribution" of up to \$100,000, in the aggregate. Distributions are exempt from the 10% early withdrawal excise tax and are not subject to the 20% federal income tax withholding.¹ Income taxation on the distribution is spread over 3 years. Participant may elect to repay all or any portion of the distribution to any qualified plan the participant is otherwise eligible to make a rollover contribution or to an IRA, within 3 years following the distribution. Repayment is considered a timely rollover of an eligible rollover distribution. 	CARES Act	1/1/20 – 12/31/20	Plan amendment and updated Summary Plan Description (SPD) or an SMM required.	This is an optional provision, providing temporary relief only. Employers should review their plan documents to ensure they allow for and contain a procedure to accept indirect rollovers made by lump sum payment.

¹ 10% federal income tax withholding will apply unless the participant elects otherwise.

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Qualified participants are those who are diagnosed with COVID- 19, or whose spouse or dependent has been diagnosed with COVID- 19, or who have experienced adverse financial consequences due to the COVID-19 crisis. Plan administrators may rely on a participant's self-certification, unless the plan administrator has knowledge to the contrary.				
Increased Limit for New Plan Loans The maximum loan amount has been increased for qualified participants to the lesser of \$100,000 or 100% of a qualified participant's vested account balance. See above for definition of "qualified participant."	CARES Act	3/27/20 – 9/22/20	Plan amendment, amendment to loan procedures and updated SPD or an SMM required.	This is an optional provision, providing temporary relief only. Eligible loans must be taken no later than 9/22/20.

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Delayed Repayment by Qualified Participant for Existing Loans Qualified participants may delay loan repayments that are due during the period 3/27/20 through 12/31/20 for up to one year. Interest will continue to accrue during the period of the delay and the loan will be re-amortized.	CARES Act	3/27/20 – 12/31/20	Plan amendment, amendment to loan procedures and updated SPD or an SMM are required.	This is an optional provision, providing temporary relief only.
Delayed Loan Repayments by Any Participant Participants, including participants who are not qualified participants, may delay loan repayments otherwise due during the period April 1, 2020 through July 14, 2020. Delayed loan repayments must be made no later than July 15, 2020.	IRS Notice 2020-23	4/1/20 – 7/14/20	Plan amendment and amendment to loan procedures required, as applicable, no later than December 31, 2020. Updated SPD or an SMM are required.	No additional interest is accrued on the delayed loan repayments for the period of the delay. Loan repayments are typically made through payroll deductions. Because payroll deductions may not be sufficient make-up the delayed loan repayments, employers who wish to offer this delay in loan repayments should consult with their third-party plan administrator to ensure that appropriate procedures are in place for the participant to catch-up on the delayed repayments. This is optional, providing temporary relief program only.



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 Temporary Waiver of Required Minimum Distributions Plans may waive required minimum distributions for 2020 for participants already receiving distributions, for participants who are required to begin distributions in 2020 or would otherwise receive their first required minimum distribution for 2020 (which is payable no later than April 1, 2021). Plans may disregard 2020 in determining the 5-year period applicable for determining the timing of the payment of the death benefit to a non-spouse beneficiary.² 	CARES Act	3/27/20	Plan amendment and updated SPD or an SMM required.	This is optional, providing temporary relief only.
Responsive Actions Taken by Employers In response to the COVID-19 crisis, employers may choose to prospectively suspend employer elective, matching, or non-elective contributions.			Plan amendment is required no later than the end of the plan year in which the change is effective, and, in some cases,	Employers should review their plan documents to ensure that mid-year changes are permitted and that contribution changes do not take away an already accrued benefit. Also, safe harbor plans are more restrictive and employers may be prohibited from suspending

² The Setting Every Community Up for Retirement Enhancement Act (the "SECURE Act") requires that death benefits to individual beneficiaries (other than "eligible designated beneficiaries") be paid no later than 10 years following the death of the participant. Although the CARES Act expressly provides for disregarding 2020 in applying the 5-year rule for the payment of a death benefit, following the SECURE Act, the 5-year rule only applies if the participant dies without an individual beneficiary. The CARES Act does not address disregarding 2020 for the purposes of the 10-year rule.

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			may be required before the suspension becomes effective. An updated SPD or an SMM is also required. 30-day advance notice is required for safe harbor plans that reduce or suspend employer contributions. Safe harbor plans that reduce or suspend contributions will have to satisfy non-discrimination testing.	safe harbor matching or non-elective contributions, or making other mid-year changes.



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Delay in Forwarding Participant Contributions or Loan Repayments The DOL will not take enforcement action against a plan sponsor for a delay in forwarding participant contributions or loan repayments to the plan's trust; provided the delay is due to the COVID-19 crisis.	EBSA Notice 2020-01	3/1/2020 to the 60th day following the announced end of the COVID-19 National Emergency		The IRS may still impose an excise tax for late contributions.
Furlough, Layoff or Other Actions Taken by Employer Many employers already have made or will make the difficult decision to furlough employees, lay off employees, or reduce employee hours.	ERISA; Internal Revenue Code		Review plan documents to determine how affected employees are to be treated under the plan, including, but not limited, for the purpose of determining deferral contributions and employer-paid contributions, earning vesting credit, and entitlement to plan distributions.	



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			Advise employees of ability to change elections. Evaluate for partial plan	
			termination issues.	
Extension of Deadlines for Refunding Excess Deferrals and processing ADP Refunds The deadline to refund 2019 excess employee deferral contributions made to a tax- qualified retirement plan is extended from April 15, 2020 to July 15, 2020. The deadline for refunding 2019 excess contributions to highly compensated employees in connection with nondiscrimination testing is extended from March 15, 2020 to July 15, 2020.	IRS Notice 2020-23	Until 7/14/20	Timely process refunds under the revised timelines.	



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Extension of Deadline for 60- Day Rollover by Participants If the end of the 60-day period for completing the indirect rollover of an eligible rollover distribution falls between April 1 and July 14, 2020, the deadline is automatically extended to July 15, 2020.	IRS Notice 2020-23	4/1/20 – 7/14/20	Review and update plan documents, as necessary, and special tax notice.	
	Single	Employer Defined	Benefit Pension Pla	ans
Delay in Minimum Contributions Minimum funding contributions due in 2020 may be delayed until January 1, 2021.	CARES Act	3/27/20	Plan amendment may be required. Plan sponsors who wish to take advantage of this delay should consult with their plan actuary.	This is a temporary relief program expiring on 12/31/20. Employers taking advantage of delayed contributions will pay interest on deferred amounts.



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Use of 2019 AFTAP Plan sponsor may elect to use the plan's 2019 adjusted funding target attainment percentage (AFTAP) for the 2020 plan year.	CARES Act	3/27/20	Plan amendment may be required before the end of the 2020 plan year. Plan sponsor should consult with their plan actuary.	This is a temporary relief program.
Responsive Actions Taken by Employers In response to the COVID-19 crisis, employers may choose to freeze or reduce future benefit accruals.	ERISA; Internal Revenue Code		Plan amendment is required to be adopted before the freeze or reduction in benefit accruals is effective. 45-day advance notice (15-day advance notice in the case of a "small plan") is required prior to freeze or reduction in benefit accrual.	Employers must take care to not reduce accrued benefits.

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Furlough, Layoff or Other Actions Taken by Employer Many employers have already made or will make the difficult decision to furlough employees, lay off employees, or reduce employee hours.	ERISA; Internal Revenue Code		Review plan document to determine how affected employees are to be treated under the plan, including, but not limited, for purposes of accruing benefits, earning vesting credit and entitlement to distributions from the plan. Evaluate plan for partial plan termination issues.	Employers may need to address issues such as vesting and definition of compensation taken into account for plan purposes.
Extension of Deadlines for PBGC Premiums for Pension Plans The PBGC extended the deadline to July 15, 2020, for PBGC insurance premium payments that would otherwise have been due between April 1, 2020 and July 14, 2020.	ERISA § 4001(i) PBGC Notice, dated April 10, 2020	4/1/20 – 7/14/20	Plan sponsors must notify the PBGC that they are eligible for the filing extension on or before the final day of the extension period.	





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Fringe Benefits							
Student Loan Repayment Permits tax-free employer payments of principal or interest on qualified student loans, up to \$5,250 per employee, under a Code §127 educational assistance program.	CARES Act	3/27/20 – 12/31/20	Requires a written educational assistance program, or an amendment to an existing program.	This is a temporary provision expiring on 12/31/20.			
 Permissible Cafeteria Plan Election Changes Employers may choose (but are not required) to permit the following prospective mid-year election changes for the 2020 calendar year, regardless of whether the basis for the election change satisfies otherwise applicable cafeteria plan criteria. Dependent Care FSA – may elect to participate, revoke prior election to participate, increase or decrease contribution amount previously elected. Health FSA (general purpose and limited 	IRS Notice 2020-29	1/1/20 – 12/31/20	Inform employees of any mid-year election changes employer chooses to allow for 2020. Amend cafeteria plan document by December 31, 2021 to reflect any such changes. In order to permit an employee to revoke a prior election to participate in the employer's health plan, the	Employers will need to work with third party administrators to administer any of the mid-year election changes the employer chooses to adopt. Election changes cannot be made retroactively and no refunds are permitted. Absent actual knowledge to the contrary, employers may rely upon employee attestations. Employers can limit the number of permissible election changes. Employers can limit mid-year election changes with respect to health FSAs and dependent care FSAs to no less than the amount already reimbursed.			



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 purpose) – may elect to participate, revoke prior election to participate, increase or decrease contribution amount previously elected. Employer Sponsored Health Coverage – may elect to participate, switch coverage option (including self-only to family), or revoke prior election to participate in order to enroll in other health coverage. 			employer must obtain a written attestation that the employee is enrolled, or will immediately enroll in, other comprehensive health coverage not sponsored by the employer. IRS Notice 2020-29 includes a sample attestation.	To prevent adverse selection of health coverage, employers can limit elections to circumstances in which an employee's coverage will be increased or improved as a result of the election (for example, by electing to switch from self-only coverage to family coverage, or from a low option plan covering in-network expenses only to a high option plan covering expenses in or out of network).
Extended Coverage Periods for (General and Limited Purpose) Health FSAs and Dependent Care FSAs Employers may (but are not required to) amend their cafeteria plans to permit unused amounts remaining in a FSA as of the end of a grace period ending in 2020, or as of the end of a plan year ending in 2020, to be used to reimburse eligible expenses incurred through December 31, 2020.	IRS Notice 2020-29	1/1/20 – 12/31/20	Inform employees if extended coverage period is implemented for 2020. Amend cafeteria plan document by December 31, 2021 to reflect change.	This provision applies to a FSA only if it (i) has a non-calendar plan year or (ii) provides for a grace period (with respect to which prior year contributions can be used to reimburse eligible expenses incurred during the first 2 ½ months of the immediately following year). This provision effectively extends the end of the grace period or the end of the plan year, as applicable, until December 31, 2020. This provision may be applied to a non-calendar year health FSA with a rollover provision (in spite

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				of rule that prohibits health FSAs from including both a carryover and a grace period provision). If employer chooses to extend a general purpose health FSA coverage period for 2020, any covered employee will not be able to contribute to a HSA in 2020. The employer will need to work with its FSA administrator to administer this change.
Commuter Benefit Generally, employees may change their elections at any time. Employees may wish to change their elections given stay at home orders.	Code §132	Ongoing	Inform employees of their right to make election changes.	
		Reporting and Not	tice Obligations	
Participant Disclosures and Notices DOL announces good faith relief for delay in participant disclosures and notices required to be distributed pursuant to DOL regulations during the period March 1, 2020 through 60 days following announcement of the end	EBSA Notice 2020-01	3/1/20 – 60 days following announcement of the end of the COVID-19 National Emergency	Employer must act in good faith to furnish disclosures or notices as soon as administratively practicable.	Employers should keep records of delays and their good faith distribution efforts. Good faith distribution includes electronic distribution if the employer believes the employee has access to email, text messaging, and employer websites.



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of the COVID-19 National Emergency.				
Includes, among others, annual funding notices, summary annual reports, SPDs and SMMs, QDRO notices, periodic pension benefit statements, QDIA notices.				
COBRA Election Notice DOL and IRS announce extension of deadline to provide COBRA election notice during the period March 1, 2020 through 60 days following announcement of the end of the COVID-19 National Emergency.	Notice of relief; extension of timeframes (85 Fed. Reg. 26351 (May 4, 2020))	3/1/20 – 60 days following announcement of the end of the COVID-19 National Emergency	Employers will need to communicate with their COBRA administrators regarding whether to postpone the provision of COBRA election notices during the period March 1, 2020 through 60 days following announcement of the end of the COVID-19 National Emergency.	Although employers may delay sending COBRA election notices, no COBRA premium amount relief has been provided (e.g., no government COBRA premium subsidy). Ideally, therefore, employers will provide COBRA election notices as soon as possible (so that employees may elect and begin paying for COBRA if they so choose – rather than having required COBRA premiums that will eventually need to be remitted in order for COBRA to take effect accumulate over a longer period).



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Form 5500 IRS extends filing deadline to July 15, 2020 for retirement and welfare plans whose Forms 5500 were due between April 1, 2020 and before July 15, 2020.	IRS Notice 2020-23	4/1/20 – 7/14/20	Timely file Form 5500s under revised filing schedule.	Extension may be granted by filing Form 5558 by July 15, 2020; however, the extended due date remains the same as it would have been absent this relief.
		Participant Deadl	ine Extensions	
COBRA and HIPAA Special Enrollment Events DOL and IRS announce extension of certain deadlines during the period March 1, 2020 through 60 days following announcement of the end of the COVID-19 National Emergency. Includes HIPAA special enrollment request deadline, COBRA election period, COBRA premium payment deadline, COBRA qualifying event and disability notice deadlines.	Notice of relief; extension of timeframes (85 Fed. Reg. 26351 (May 4, 2020))	3/1/20 – 60 days following announcement of the end of the COVID-19 National Emergency	Employer must honor delayed deadlines (e.g., allowing delayed plan enrollment due to HIPAA special enrollment event, maintaining COBRA coverage even if premiums aren't paid, etc.) Employers should communicate these extended deadlines to employees so that they may take necessary actions within the extended timeframes.	Employers will need to work with COBRA administrators and other service providers to administer delayed deadlines, including not canceling COBRA coverage due to non-payment of premiums. In this regard, note that COBRA coverage that was cancelled due to non-payment of premiums prior to the publication of this guidance will need to be retroactively re-instated if premiums are remitted by the newly extended deadline – and that previously expired COBRA election periods have been similarly extended. Although agency guidance is unclear as to whether these deadline extensions must be proactively and affirmatively communicated to employees, employers probably have a fiduciary obligation in this regard as employees may not otherwise be aware of these important rights and the steps they must take to exercise them.

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Claims for ERISA Plan Benefits DOL and IRS announce extension of ERISA claims procedure deadlines during the period March 1, 2020 through 60 days following announcement of the end of the COVID-19 National Emergency. Includes deadline for participants and beneficiaries to make claims for benefits and appeal denied claims under all ERISA plans. Also includes deadline for participants and beneficiaries to request, or to file information to perfect a request, for external review of certain claims under a non- grandfathered group health plans.	Notice of relief; extension of timeframes (85 Fed. Reg. 26351 (May 4, 2020))	3/1/2020 to the 60th day following announcement of the end of the COVID-19 National Emergency	Employer must honor delayed deadlines (e.g., accepting delayed filings of claims, appeals and, if applicable, external review requests beyond the otherwise applicable deadline). Employers should communicate these extended deadlines to employees so that they may take necessary actions within the extended timeframes. Employers should review and update claims procedures under their plan documents and SPDs. Any	Employers will need to work with third-party claims administrators for all of their ERISA plans to ensure proper administration of the delayed deadlines available to participants and beneficiaries. Note that health FSAs are subject to ERISA claims procedures. Therefore, if the run-out period within which to submit health FSA claims for 2019 would have expired on or after March 1, 2020, employees must be given additional time (until 60 days following the announced end of the COVID-19 National Emergency) to submit such claims. Employers will need to ensure that health FSA administrators are adhering to the extended deadline. If any claim, appeal or external review request was made on or after March 1, 2020 and was previously denied due to untimeliness, the denial should be reviewed to determine if the claim, appeal or external review request must be considered based upon the extended deadlines. The deadlines under ERISA for plans to adjudicate claims and appeals made by participants and beneficiaries have not been suspended. Thus, plans should continue to adhere to their current procedures for reviewing claims and appeals in a timely manner.



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			amendments to plan documents must be made no later than December 31, 2020.	