Roper St. Francis Healthcare Plan Updates

May 2023

New Regulatory Guidance

There are two distinct pandemic declarations that will end this year, the President's National Emergency and the Public Health Emergency.

As a result of the **National Emergency** regarding COVID-19, regulatory guidance was issued to *temporarily* extend certain plan deadlines and allow election changes. On April 10, 2023, the President signed a joint resolution ending the National Emergency. Additional guidance related to the end of the National Emergency has since been issued and is explained further below.

The **Public Health Emergency** provided certain mandates related to coverage of COVID-19 vaccines and testing. Beginning May 12, 2023, select benefits related to coverage of testing will be changing. Additional detail has been provided below.

National Emergency - Purpose of Rules

Because of the National Emergency, some teammates may have had difficulty meeting certain plan deadlines for enrollment or claims filing, or may have difficulty utilizing account-based funds. The purpose of the rules was to allow additional time for teammates to meet certain plan deadlines, and allow election changes to be made.

National Emergency - Effective Date

The rules applied to any deadline that ended on or after March 1, 2020, i.e., the beginning of the Outbreak Period. Any plan deadlines ending on or after March 1, 2020 will be extended through the earlier of 1 year following the date in which the deadline would have ended or following the end of the National Emergency plus an additional 60 days, i.e., the end of the Outbreak Period.

For example, if an employee had 30 days remaining to make an election for one of the deadlines impacted by this relief, the employee would have either 30 days following the end of the Outbreak Period or one year from when the deadline would have passed, if earlier, to take action.

While the president signed a joint resolution ending the national emergency on April 10, 2023, the Department of Labor has commented that the Outbreak Period end will remain July 10, 2023, which was the original date announced.

Plans Impacted and Wind-Down of Temporary Guidelines

Benefit Plans Provisions Impacted	New Guidelines
HIPAA Special Enrollment timeframe is 31 days following the date of the event (such as acquiring a new spouse or dependent) for changes to medical plan elections.	The deadline to submit a medical plan change will be extended to 31 or 60 days following the earlier of the end of the Outbreak Period or one year following the occurrence of the event, depending upon the event (listed below). As an example, if a teammate marries on April 15, 2022 the teammate would now have until whichever time is earlier to submit a change: - 31 days following the July 10, 2023 Outbreak Period end (i.e., August 10, 2023) - May 16, 2023 (i.e., 31 days after April 15, 2023). In this case, the one year deadline would precede the Outbreak Period deadline. HIPAA Special Enrollment events include the following: • 31 days: birth, adoption, placement for adoption, marriage, or loss of other coverage • 60 days: loss of eligibility for state Medicaid or CHIP or gains eligibility for premium assistance under Medicaid or CHIP
Claim filing deadline for FSA plan year is the March 31 following the end of the plan year.	The deadline to submit 2022 health or limited purpose FSA claims is as follows:

	 2022 plan year claims: 90 days following the July 10, 2023 Outbreak Period end (i.e., October 8, 2023)
	This extension does not apply to the dependent care FSA.
External review deadline for medical plan was 4 months from date of adverse benefit determination.	As an example, if a teammate received an adverse benefit determination of a medical claim on March 1, 2023 the deadline to submit a request for external review is 4 months or typically July 1, 2023. However, because of the relief, the timeframe is pended is to the end of the Outbreak Period (July 10, 2023). Then, the teammate will have 4 months from this date to submit a request for external review (i.e., November 10, 2023).
Claim appeal deadline for FSA was 180 days.	As an example, if a teammate received an adverse benefit determination on February 15, 2023 the deadline to submit an appeal is 180 days, which would typically be August 15, 2023. However, the timeframe in which to appeal is pended to the end of Outbreak Period (July 10, 2023). Then, the teammate will have 180 days from this date to submit a request for an appeal (i.e., January 6, 2024).
Public Health Emergency: Over-the-counter COVID-19 tests were covered at 100% under the RSFH health plan	Beginning July 1, 2023, Over-the-counter COVID-19 test coverage will be excluded under pharmacy.
Public Health Emergency: Physician ordered COVID-19 testing and the associated visit were covered at 100% under the RSFH health plan	Beginning May 12, 2023, typical member cost-sharing will apply to Physician ordered COVID-19 testing and the associated visit under the RSFH health plan.