



March    , 2021

**Re: Recent Department of Labor Information in Response to COVID-19**

We continue to monitor the COVID-19 situation and how guidance from the Department of Labor (“DOL”) may impact our customers’ plans under the Employee Retirement Income Security Act of 1974 (“ERISA”). Recently, the DOL issued Disaster Relief Notice 2021-01 which supplements related guidance released in 2020.

The attached Regulatory Update contains important updates.

## REGULATORY UPDATE

In May of 2020, the DOL, Internal Revenue Service, and Department of the Treasury announced the extension of certain ERISA and Internal Revenue Code timeframes during the COVID-19 National Emergency (the “2020 Notice”). The relief period under the 2020 Notice began on March 1, 2020 and was to continue until 60 days after the announced end of the National Emergency (which, as of March 18, 2021, is still ongoing).

However, in late February of 2021, the DOL clarified how to calculate these timeframes and made clear that the beginning and end dates of the extension period will vary among individual participants and beneficiaries.

Per the clarification, if your group health, disability, or other welfare plan is subject to ERISA, individuals and plans with timeframes that are subject to the relief under 2020 Notice will have the applicable periods under the 2020 Notice disregarded until the **earlier** of the following periods: (a) **one year from the date the individual was first eligible for relief** (starting no earlier than March 1, 2020); *or* (b) 60 days from the announced end of the National Emergency (which, as of March 18, 2021, is still ongoing).

One year from March 1, 2020 is February 28, 2021. As such, the relief provided under the 2020 Notice may no longer be available to certain individuals or may become unavailable in the near future.

As a reminder, the 2020 Notice extended the following timeframes:

1. The 30-day period (or 60-day period, if applicable) to request special enrollment in a group health plan upon experiencing certain enrollment events (*e.g.*, loss of eligibility for group health coverage or upon acquisition of a new spouse or dependent by marriage, birth, or adoption).
2. The 60-day election period for COBRA continuation coverage.
3. The date the plan is required to provide a COBRA election notice.
4. The date for making COBRA premium payments.
5. The date for individuals to notify the plan of a qualifying event or determination of disability.
6. The date within which individuals may file a benefit claim under the plan’s claims procedure.
7. The date within which claimants may file an appeal of an adverse benefit determination.

8. The date for claimants to file a request for an external review after receipt of an adverse benefit determination or final internal adverse benefit determination.
9. The date within which a claimant may file information to perfect a request for external review.

***Please be assured that if MetLife acts as claims administrator for any of your ERISA benefit plans, MetLife has adjusted its claim process as needed to comply with all applicable requirements.***