

National Public Health Emergency Extended

The National Public Health Emergency declared by the federal government to combat the COVID-19 Pandemic has been extended for at least an additional 90 days until January 16, 2022. First declared on January 31, 2020, the public health emergency has been extended seven times. The Department of Health and Human Services (HHS) may end the public health emergency earlier or extend it past January 16, 2022. The continuation of the public health emergency impacts employee benefits, including health plans.

COVID-19 COVERAGE

While the public health emergency is in effect, group health plans and insurers must cover COVID-19 tests and related services without cost-sharing. Under the ACA, vaccines are covered as an in-network preventive benefit by non-grandfathered plans; however, COVID-19 vaccines must also be covered out-of-network during the public health emergency. All County Health Pool Plans (CHP) comply with provisions of the public health emergency.

COBRA BENEFITS

Continuation of Health Coverage (COBRA) allows individuals to continue participating in their group health plan under certain circumstances, such as a voluntary or involuntary job loss, transition between jobs, reduction in hours worked, death, divorce, or other life events. Under the public health emergency, the 60-day window to elect COBRA coverage and make the first premium payment has been extended. [Notice 2021-58](#), issued by the IRS, states:

... the applicable periods under the Emergency Relief Notices for individuals and plans are therefore disregarded until the earlier of (1) one year from the date the individuals and plans were first eligible for relief, or (2) 60 days after the announced end of the National Emergency (the end of the Outbreak Period).

In addition to providing an extended window to elect COBRA coverage, individuals who begin COBRA coverage outside of the 60-day election window will, in general, have one year and 105 days after the COBRA notice was provided to make their initial premium payment. Individuals who elected coverage during the 60-day window will have one year and 45 days to make their initial premium payment.



WHAT THIS MEANS FOR COUNTIES

CHP-member plans meet the enhanced requirements under the public health emergency. CHP will continue to monitor guidance issued by the HHS regarding group health insurance plans and respond accordingly. Counties who are not part of CHP should review their group health plans to make sure they are in compliance. For more information about CHP or changes to group health plans under the public health emergency, contact CTSI at 303 861 0507.