Tip Sheet - COBRA Continuing Group Insurance

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Active group insurance coverage for you and your covered dependents ends on the last day of the month in which you end employment or have another qualified event. COBRA, a federal law, requires that you and your eligible family members are offered the opportunity for a temporary extension of group insurance coverage, for certain qualified situations. COBRA eligible plans include health coverage, dental coverage – and, depending on the status of the account, may include your health care Flexible Spending Account.

COBRA participants are subject to the same plan, provider and rate changes as active employees.

Note: Deductions will stop the first full pay period following the coverage end date for employment separation. Accordingly, deductions usually will be applied to any checks as long as the employee has coverage for all or some of the pay period for which the paycheck is processed.

Eligibility: Only a "qualified beneficiary" may elect to continue group insurance coverage. This may include the following individuals, who were covered by the plan on the day the qualifying event occurred: you, your spouse, and your dependent children. Each qualified beneficiary has their own right to elect or decline COBRA continuation coverage even if you decline or are not eligible for COBRA continuation.

The following individuals usually are not qualified beneficiaries for purposes of COBRA continuation: domestic partners, same sex spouses, grandchildren, stepchildren. However, if you elect COBRA continuation coverage for yourself, you may also cover your dependents even if they are not considered qualified beneficiaries under COBRA; special provisions apply.

COBRA coverage effective dates: When your employer is notified that one of these events has happened, Group Insurance will initiate a notice to you that you have the right to choose continuation coverage. Under COBRA, you have 60 days from the later of the date you lose coverage or from the date the notice to elect continuation coverage.

Important: Your active group coverage will be terminated at the end of the month a qualified event occurs. If you <u>enroll</u> in **and** <u>pay</u> for COBRA coverage, your coverage will, thereafter, be retroactively reinstated without a break in coverage.

***** While you are in your initial election and payment window, the coverage will show terminated *****

How long can I, or my dependents, continue coverage under COBRA? For you and your qualified dependents, COBRA continuation is available for <u>up to 18 months</u> from the date of the qualifying events listed below if the event would result in a loss of coverage under the group insurance plan:

- Your termination of employment for any reason, other than gross misconduct, or
- Your reduction in work hours

You or your qualified dependents may become eligible for an additional 11 months, for a maximum COBRA coverage period of 29 months – review the applicable SPDs or contact United Healthcare Customer Care Center [contact info above] for applicable timelines and deadlines to qualify; special provisions apply.

For your dependents, COBRA continuation coverage is available for <u>up to 36 months</u> from the date of the qualifying events listed below if the event would result in a loss of coverage under the group insurance plan:

- Your death, or
- Your divorce or legal separation, or
- For a dependent child, failure to continue to qualify as a Dependent under the Plan

How much does COBRA coverage cost? Premiums are listed in the Group Insurance Information brochure. COBRA premiums are 100% of the total monthly premium, plus a 2% administrative fee. The premium for a disability extension period is 150% of the monthly rate.

How do I receive more info about my COBRA rights & responsibilities? United Healthcare will send you a detailed notice that explains your rights and responsibilities for COBRA coverage. Contact United Healthcare Customer Care Center (contact info above).

You may also review summary plan descriptions for group insurance plans for COBRA information.