

COBRA

SOURCE: FEDERAL LAW

CONTACT: OFFICE OF EMPLOYEE SERVICES

COBRA (Continuing Insurance Coverage with Consolidated Omnibus Reconciliation Act of 1986) is a Federal Law that allows Ohio EPA employees and their dependents to continue group health benefits including dental and vision coverage for defined periods beyond the time they would otherwise lose those benefits.

COBRA Policy:

1. The following events qualify an employee and covered family members for 18 months of additional coverage:
 - voluntary termination
 - involuntary termination
 - reduction in work hours (such as strike, layoff, unpaid leave of absence)
2. The following events qualify dependents of employees for 36 months of continued coverage:
 - death of an employee
 - divorce or legal separation
 - dependent child losing eligibility (such as reaching age 19 or 23, getting married, no longer enrolled in an accredited school.
3. The cost of coverage is the total monthly premium--both the employer and employee shares--plus an additional 2% administrative surcharge. Coverage is not effective until the premium has been paid.
4. Employees who think they or their dependents may be eligible for COBRA coverage should
 - Contact the Office of Employee Services within 30 days of the qualifying event to receive a COBRA Eligibility Notification Form (ADM-4750).
 - Within 60 days from the date of the qualifying event, decide if you want to continue any or all of the current healthcare coverage. If you initially choose not to continue healthcare coverage, you may change your mind provided it is within the 60-day period.
 - Coverage will end if you do not pay the premium or if you or your dependents become covered under another group health plan due to re-employment, marriage, or becoming eligible for Medicare.