Consolidated Omnibus Budget Reconciliation Act (COBRA)

The Consolidated Omnibus Budget Reconciliation Act (COBRA) gives workers and their families who lose their health benefits the right to choose to continue group health benefits provided by their group health plan for limited periods of time under certain circumstances such as voluntary or involuntary job loss, reduction in the hours worked, transition between jobs, death, divorce, and other life events. Qualified beneficiaries may be required to pay the entire premium for coverage up to 102 percent of the cost of the plan.

The COBRA statute requires employers to offer continuation of group coverage including health, dental, vision, and FlexElect Medical Reimbursement Accounts to covered employees, spouses, domestic partners*, and eligible dependent children who lose group coverage due to a qualifying event. These individuals are known as qualified beneficiaries. The terms and timeframes are set by the Department of Labor and the Internal Revenue Service.

As a state employee enrolled in state-sponsored benefits, you should be aware of your COBRA rights in the event that you lose coverage due to a qualifying event. You also have the responsibility to report certain life events to your departmental

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personnel office to ensure you and your qualified dependents maintain COBRA eligibility.

* The state considers a covered domestic partner as a qualified beneficiary who may continue group coverage under COBRA.

Initial General COBRA Notice

Your departmental personnel office will provide the initial general COBRA notice to individuals covered under state-sponsored plans describing your COBRA rights. Your departmental personnel office must provide this notice to covered individuals within the first 90 days of coverage. The notice contains the information that you need to know to protect your COBRA rights while you are covered under the plans. This includes the name of the plan, a general description of the COBRA coverage provided under the plan, departmental personnel office contact information, and an explanation of any notices you must give your departmental personnel office to protect your COBRA rights.

For more information on the program and eligibility, please contact your departmental personnel office.

2023 Cobra Group Continuation Coverage

COBRA FAQ

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What is COBRA?

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What does the term "qualified beneficiary" mean?

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When do I receive COBRA information?

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What is a Qualifying Event? When do I become eligible for COBRA continuation coverage?

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How long may I be covered under COBRA?

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When I retire from state service, CalPERS continues my medical and dental coverage. Are state employees offered vision coverage under COBRA at the time of retirement?

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If I don't want COBRA for myself, may I elect continuation coverage for my dependents?

How do I elect COBRA coverage?

How does my departmental personnel office become aware of a qualifying event?

How long do I have to elect COBRA continuation coverage?

How much is the monthly COBRA premium? When is the premium due?

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