COBRA Coverage Timeline

Instructions: Use this document to determine the length of COBRA continuation coverage based on the type of qualifying event.

**Termination of Employment or Reduction in Hours: 18 MONTHS**

Month 0 Month 18

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Qualifying Event End of COBRA Coverage



**Divorce, Legal Separation, Death of Employee, Medicare Eligibility, Dependant Exceeding Age Limit:**

**36 MONTHS**

Month 0 Month 36

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Qualifying Event End of COBRA Coverage



**Disability Extension: UP TO 29 MONTHS**

Month 0 Month 18 Month 29

*11-month disability extension*

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Qualifying Event *Deadline for Informing* End of COBRA Coverage

*Plan Administrator of*

*Disability Determination*



**Second Qualifying Event: 36 MONTHS**

Month 0 Month18 Month 36

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Initial Second Qualifying Event End of Second

Qualifying Event Begin Second COBRA Period COBRA Period