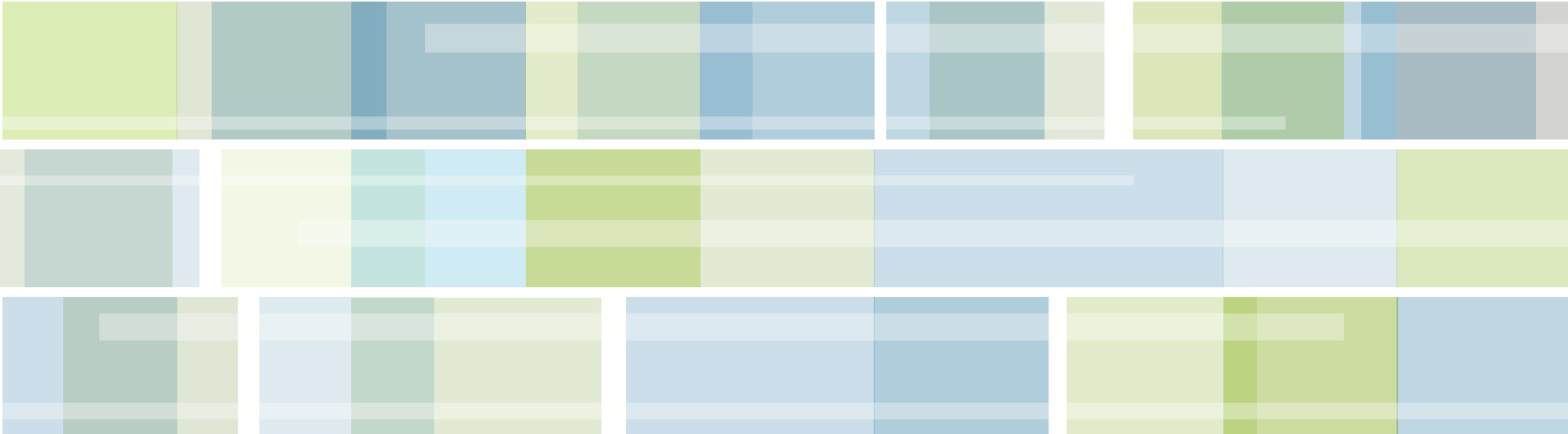


# Top 5 COBRA Notices

## All-in-One-Compliance Chart



## Top 5 COBRA Notices

[COBRA](#) (the federal Consolidated Omnibus Budget Reconciliation Act) requires group health plans sponsored by employers with [20 or more employees](#) in the prior year to provide employees and eligible family members (including legally married same-sex spouses who are otherwise eligible for coverage under the plan) with specific notices explaining their COBRA rights. Whether you're hiring a new employee or preparing for a departure, you can download model notices and keep track of your compliance with this list.

Document	Type of Information	Provide To	Provided By	Timing of Disclosure
<a href="#">General COBRA Notice</a>	Notice of the right to purchase a temporary extension of group health coverage when coverage would otherwise be lost due to qualifying events, as well as other health coverage options that may be available (such as the Health Insurance Marketplace).	Covered employees and their spouses	<a href="#">Plan administrator</a>	Within 90 days after the date group health plan coverage commences <b>Tip:</b> Including this notice in the SPD and providing the SPD within the 90-day limit may satisfy this requirement.
<a href="#">Notice of Qualifying Event</a>	Notice of the occurrence of a qualifying event that is the employee's death, termination of employment (other than for gross misconduct), reduction in hours, or Medicare entitlement.	Plan administrator	Employer (Notice of other qualifying events must be provided by qualified beneficiaries.)	Within 30 days of the qualifying event <b>Tip:</b> The qualifying event determines who is eligible for COBRA and for how long.
<a href="#">COBRA Election Notice</a>	Describes the right to COBRA continuation coverage and how to make an election upon the occurrence of a qualifying event, as well as other health coverage options that may be available (including coverage through the Health Insurance Marketplace).	Employees, spouses, and dependent children who are <a href="#">qualified beneficiaries</a>	<a href="#">Plan administrator</a>	Generally within 14 days after receiving notice of a qualifying event <b>Tip:</b> Each qualified beneficiary has a separate right to elect continuation coverage.

## Top 5 COBRA Notices

Document	Type of Information	Provide To	Provided By	Timing of Disclosure
<a href="#">Notice of Unavailability of COBRA Coverage</a>	Notice that an individual is not entitled to COBRA or an extension of continuation coverage, which explains the reason the group health plan is denying the request.	Individuals who have submitted a notice of qualifying event whom the plan determines are not COBRA-eligible	<a href="#">Plan administrator</a>	Generally within 14 days after receiving notice of a qualifying event <b>Tip:</b> Generally, an employee, spouse, and dependent children are entitled to COBRA.
<a href="#">Notice of Early Termination of COBRA Coverage</a>	Notice that COBRA coverage will terminate earlier than the maximum period of coverage, including the date and reason for termination, and any rights to elect alternative coverage.	Qualified beneficiaries whose COBRA coverage will end before the maximum period	<a href="#">Plan administrator</a>	As soon as practicable following the administrator's determination that coverage will terminate <b>Tip:</b> Certain events—such as failure to pay premiums—may justify early termination.

Be sure to review the law in [your state](#) for applicable "mini-COBRA" requirements (including for companies with fewer than 20 employees).

Qualifying Events		
<b>Employee/Spouse/Dependent Child</b>	<ul style="list-style-type: none"> <li>• Termination of employment (other than for gross misconduct)</li> <li>• Reduction in hours of employment</li> </ul>	<b>18 months*</b>
<b>Spouse/Dependent Child</b>	<ul style="list-style-type: none"> <li>• Death of employee</li> <li>• Employee becomes entitled to Medicare</li> <li>• Divorce or legal separation of the employee from spouse</li> </ul>	<b>36 months</b>
<b>Dependent Child</b>	<ul style="list-style-type: none"> <li>• Loss of dependent child status under the plan rules</li> </ul>	<b>36 months</b>

\*Qualified beneficiaries entitled to 18 months of continuation coverage may become entitled to a disability extension of an additional 11 months (for a total maximum of 29 months) or an extension of an additional 18 months due to the occurrence of a second qualifying event (for a total maximum of 36 months). [An Employer's Guide to COBRA](#) has more information on qualifying events.

## Top 5 COBRA Notices

Provided by:



The Stratford Group  
271 US Highway 46, G206/G207  
Fairfield, NJ 07004

Phone: 866-217-9053  
[www.getStratford.com](http://www.getStratford.com)

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