



## ELECTION PERIOD

### For employees and dependents eligible for continuation coverage

and/or your dependents must formally elect continuation coverage on the form provided and submit the appropriate premium payment within 105 days of the date coverage terminated or the date of notice, whichever is later. Failure to do so will result in the forfeiture of your continuation coverage. Each covered participant has the right to elect continuation coverage independently. **You and your dependents will not have coverage after the date coverage terminated until you formally elect continuation coverage and pay all premiums due retroactive to the first day of the month following the date coverage terminated.**

### For dependents whose coverage terminates due to loss of dependent status

The member or the covered dependent has the responsibility to notify one of the following of a divorce or when a covered dependent ceases to be a dependent. If you are a dependent of a member, you must notify the member of the change in status. If you are a dependent of a dependent, you must notify the member of the change in status. If you are a dependent of a dependent who is a dependent of a member, you must notify the member of the change in status. If you are a dependent of a dependent who is a dependent of a dependent of a member, you must notify the member of the change in status.



**When can I enroll in Marketplace coverage?**

**For what reasons can COBRA continuation coverage be cancelled by ERS?**

COBRA continuation coverage may be cancelled prior to the end of the continuation coverage expiration date if:

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COBRA continuation coverage will end when the new group health plan coverage begins.

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