

## Frequently Asked Questions COBRA

### Important Information About Your Continuation of Benefits

Informatica LLC has contracted with Igoe Administrative Services as our COBRA Administrator. If you lose benefit coverage due to certain Qualifying Events, you may be eligible to continue coverage for yourself and family on a temporary basis.

If you are eligible for COBRA, you will receive a packet from Igoe Administrative Services approximately **two weeks** after notification of your Qualifying Event. The packet of information will include information about the length of time coverage may be extended, premium amounts due and enrollment forms.

Your current Medical, Dental, Vision, Basic Life, Voluntary Life, Disability, and/or EAP benefits will **cease at the end of the month** of your Qualifying Event. Your Critical Illness, Legal Services, Auto & Home, Pet, Health Care FSA and/or Dependent Care FSA benefits cease immediately.

Your COBRA packet may arrive after this date and you have 60 days to elect continuation of coverage under COBRA. After you elect and pay, Igoe will notify the insurance companies to reinstate your coverage retroactive to the beginning of the month of your COBRA. However this can take up to 2 weeks.

**What this means is you may have a time where you are not insured until you elect and pay for your COBRA benefits. This gap is inconvenient but sometimes unavoidable. Rest assured, your coverage will be retroactive if you elect and pay timely.**

Should you have any questions after you receive the packet of information, please contact Igoe at:

Igoe Administrative Services  
COBRA Department  
P.O. Box 2291  
Omaha, NE 68103-2291  
858-673-3670x2 or 800-633-8818x2 Phone  
800-975-7296 Fax



**Note:** Please make sure that Informatica has your current address on file so there will be no delay in receiving your COBRA election information in a timely manner.

If your spouse/domestic partner and/or children have a different address than you please Igoe Administrative Services so a separate packet is mailed to them.

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## **What is COBRA?**

Congress passed the Consolidated Omnibus Budget Reconciliation Act (COBRA) health benefit provisions in 1986. The law amends the Employee Retirement Income Security Act, the Internal Revenue Code and the Public Health Service Act to provide continuation of coverage that might otherwise be terminated.

## **What does COBRA do?**

The law mandates that employers offer temporary continuation of group health care coverage to plan participants and certain family members at group rates. This coverage is only available when coverage is lost due to certain specific events, also known as Qualifying Events. The type of Qualifying Event will determine who receives COBRA continuation coverage and the amount of time benefits will be offered under COBRA.

## **Who is eligible?**

COBRA continuation coverage is generally available to employees, spouses, eligible domestic partners and children covered by the group health on the day before a Qualifying Event. Please note Informatica extends COBRA continuation coverage to Domestic Partners although it is not required under COBRA regulation.

## **What plans are covered under COBRA continuation of benefits?**

The medical, dental, vision, EAP, and Health Care FSA plans are all included under COBRA. However, you may continue only those plans in which you were enrolled on the date of your loss of eligibility.

## **When does the COBRA continuation of benefits begin?**

If you choose to elect COBRA continuation of benefits, then there will be no interruption of coverage, as the continuation of benefits is effective on the same date that you lost eligibility. Claims for services received after the loss of eligibility will not be paid unless you elect COBRA continuation of benefits.

## **When will I get my COBRA packet?**

Igoe COBRA Administrators will mail you a COBRA packet within two weeks of being notified of your COBRA eligibility.

## **How long do I have to decide?**

Please be aware of this very important deadline, AS THERE ARE NO EXTENSIONS: You and your eligible dependents have **sixty (60)** days from the later of:

1. The effective date of the loss of eligibility (e.g. separation from employment other than for gross misconduct, medical leave extending beyond 12 weeks or taking personal leave)
2. Reduction in work hours
3. Layoff
4. The date of notification, whichever is later

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### **How is COBRA coverage provided?**

Once Igoe Administrative Services, Informatica's COBRA Plan Administrator, receives notice that a qualifying event has occurred, COBRA continuation coverage will be offered to each of the qualified beneficiaries (employee, spouse/qualified Domestic Partner, and/or eligible dependent children). Each qualified beneficiary will have an independent right to elect COBRA continuation coverage. Covered employees may elect COBRA continuation coverage on behalf of their spouses/eligible Domestic Partner, and parents may elect COBRA continuation coverage on behalf of their eligible children.

### **What events would allow me to continue my health benefits under COBRA?**

#### Employees

If you are an employee, you may become eligible for COBRA if you lose plan coverage because one of the following qualifying events happens:

- Your hours of employment are reduced to less than 24 hours per week, or
- Your medical leave extends beyond 12 weeks
- You take a personal leave of absence that continues into the next month following the date of personal leave
- Your employment ends for any reason other than your gross misconduct.

#### Spouses and Eligible Domestic Partners

If you are the spouse, or eligible Domestic Partner of an employee, you may become eligible for COBRA if you lose plan coverage because:

- Your spouse or eligible Domestic Partner dies;
- Your spouse's or eligible Domestic Partner's hours of employment are reduced to less than 24 hours per week;
- Your spouse's medical leave extends beyond 12 weeks
- Your spouse takes a personal leave of absence that continues into the next month following the date of personal leave
- Your spouse's or eligible Domestic Partner's employment ends for any reason other than his or her gross misconduct;
- Your spouse or eligible Domestic Partner becomes entitled to Medicare benefits (under Part A, Part B, or both); or
- You become divorced or legally separated from your spouse or eligible Domestic Partner.

#### Dependent Children

Dependent children may become eligible for COBRA if they lose plan coverage because of any of the following qualifying events:

- The parent-employee dies;
- The parent-employee's hours of employment are reduced to less than 24 hours per week;
- The parent-employee's medical leave extends beyond 12 weeks
- The parent-employee takes a personal leave of absence that continues into the next month following the date of personal leave
- The parent-employee's employment ends for any reason other than his or her gross misconduct;
- The parent-employee becomes entitled to Medicare benefits (Part A, Part B, or both);
- The parents/eligible Domestic Partners become divorced or legally separated; or
- The child stops being eligible for coverage under the plan as a "dependent child."

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### How long does COBRA continuation of benefits last?

#### Employee

If you lose plan coverage through Informatica because of a termination of employment or a reduction in hours, or being on leave of absence, you and your eligible family members may maintain COBRA coverage for a maximum period of **18 months** from the date of the event.

#### Dependents

If an employee's spouse and/or covered dependents lose their coverage because of the employee's death or entitlement to Medicare, the employee's legal separation or divorce, the employee's child is no longer a dependent under the Plan, the eligible family members may maintain COBRA coverage for a maximum period of 36 months from the date of the event.

If an employee becomes disabled (as determined by the Social Security Act, Title II or Title XVI) within the first 60 days of COBRA coverage, that employee and eligible family members may be able to extend COBRA for up to an additional 11 months. Notice of the determination of disability must be provided within 60 days of the date of the determination and before the end of the 18 month period.

Note: If a spouse or dependent child loses eligibility due to circumstances such as divorce or the dependent child reaching the age limit, Human Resources should be notified within 60 days of the loss of eligibility for the individual to continue coverage under COBRA.

### Do I have to enroll in all of the employee benefit plans in which I was enrolled as an active employee?

No. You may choose to continue coverage in some, all, or none of the plans in which you were enrolled.

### Igoe Administrative Services COBRA contact information:

Igoe Administrative Services  
P.O. Box 229  
Omaha, NE 68103-2291  
Phone: (800) 633-8818, option 2

[www.goigoe.com](http://www.goigoe.com)  
Questions: [COBRA@goigoe.com](mailto:COBRA@goigoe.com)

If you are eligible to continue contributing to the Health Care Flexible Spending Account (FSA) under COBRA, Navia Benefit Solutions, our Plan Administrator, will send the FSA COBRA notice and related forms to your home address. Included will be information on how to elect COBRA continuation for the Health Care FSA, where to send payments, and all other information as it related to your Health Care FSA and COBRA.

### Navia Benefit Solutions (formerly Flex-Plan) Health Care FSA contact information:

Navia Benefit Solutions  
P.O. Box 53250  
Bellevue, WA 98015-3250  
Phone: (425) 452-3500 or (800) 669-3539

[www.naviabenefits.com](http://www.naviabenefits.com)  
Questions: [customerservice@naviabenefits.com](mailto:customerservice@naviabenefits.com)  
Claim submissions: [claims@naviabenefits.com](mailto:claims@naviabenefits.com)