

1. What is COBRA?

COBRA is a law that permits employees who have lost medical, dental, flex or EAP insurance coverage to continue participation in their health insurance plan(s) on a self-pay basis through their former employer.

2. How soon do I have to respond to this notification letter?

You have 60 days from the date of your termination or from the date of your COBRA letter to elect continuation of coverage whichever is later. During this time your coverage is in a “pending state”.

3. Can my medical/dental/Rx claims still be processed during this “pending state”?

No, your medical/dental/prescription cards are inactive until you submit your enrollment form and appropriate premium payment are received at Benefit Strategies, LLC.

4. How does my coverage become re-activated?

Benefit Strategies, LLC will notify the carrier and your former employer of the receipt of your enrollment paperwork and payment and Benefit Strategies will start the reinstatement process.

Please Note:

This process may take up to 5-10 business days AFTER PAYMENT IS RECEIVED IN THIS OFFICE. If you intend to enroll, do not delay mailing the forms and payment.

5. I need on-going medical care and have medications to take. What can I do?

We recommend that you make your election as soon as possible so not to inconvenience you, your pharmacy or your providers. Prescriptions can be purchased paying the full amount, until your election is received and processed and coverage becomes effective.

6. Can I get reimbursed for medical/dental expenses during this time?

Yes. After you have enrolled, call the insurance carrier and ask for their procedure for reimbursement of claims that were paid out-of-pocket that will need to be submitted for review. For **“rejected or unpaid bills”** you will need to inform the provider of services to re-submit the claim for consideration.

7. How far back can my coverage be dated to?

COBRA coverage can only be re-instated back to the original termination date. There can be no break in coverage.

8. I did the enrollment process, paid my premium and still I was denied coverage with my provider. What can I do?

If it has been 3 weeks or more, contact this office immediately. We will contact your former employer to check on the status of your reinstatement process.

9. If I still need some assistance, whom should I call?

Please call our office if you have questions regarding premium payments, rates, terminations, etc at 603-647-4666.