



COBRA Continuation Coverage Assistance

The American Recovery and Reinvestment Act (ARRA) provides a COBRA premium reduction for eligible individuals who are involuntarily terminated from employment through the end of May 2010. Due to the statutory sunset, the COBRA premium reduction under ARRA is not available for individuals who experience involuntary terminations after May 31, 2010. However, individuals who qualified on or before May 31, 2010 may continue to pay reduced premiums for up to 15 months, as long as they are not eligible for another group health plan or Medicare.

The Unemployment Compensation Extension Act of 2010 signed by the President on July 22, 2010, did not extend the COBRA premium reduction.

The U.S. Department of Labor's (DOL) Employee Benefits Security Administration (EBSA) has a dedicated Web site that explains the COBRA extension (www.dol.gov/ebsa/cobra.html). To receive e-mailed updates from EBSA about any new information on their COBRA extension Web site (such as notification of the new documents translated into Spanish), enter your e-mail address at: https://service.govdelivery.com/service/subscribe.html?code=USDOL_231.

ETA requests that One-Stop Career Centers and other recipients of this document review the information on this EBSA Web site dedicated to explaining this benefit to individuals who have lost their jobs in the current economic recession, and make available to individuals and employers any other relevant information from this EBSA Web site.

Employee Benefits Security Administration

Website Key links

(Spanish translations will be available soon)

I. Documents for Workers or Former Workers

- COBRA Premium Reduction Fact Sheet (www.dol.gov/ebsa/newsroom/fsCOBRAPremiumreduction.html)
- Frequently Asked Questions on the COBRA Premium Reduction (www.dol.gov/ebsa/faqs/faq-cobra-premiumreductionEE.html)
- COBRA poster in the format of a flyer (www.dol.gov/ebsa/pdf/joblossposter2.pdf)
- COBRA flyer for individuals (www.dol.gov/ebsa/pdf/cobrastimulusflyer2.pdf)
- COBRA flyer for individuals whose employer or health insurance plan denied them the COBRA premium reduction (www.dol.gov/ebsa/pdf/distributionflyer09.pdf)
- Official application for DOL review for individuals whose employer or health insurance plan denied them the COBRA premium reduction (www.dol.gov/ebsa/COBRA/main.html). The description will be updated soon; the current application can be used until then.

II. Documents for Employers

- COBRA Premium Reduction Fact Sheet (www.dol.gov/ebsa/newsroom/fsCOBRAPremiumreduction.html)
- COBRA flyer for employers (www.dol.gov/ebsa/pdf/cobrastimulusflyer1.pdf)
- Model Notices (www.dol.gov/ebsa/COBRAmodeInotice.html)