## ARP Continuation Coverage Election Notice

(not for use for Clients eligible for federal COBRA)

For use with Sun Life coverage that is subject to state continuation requirements commencing during the period of April 1, 2021 through September 30, 2021.

Click or tap to enter a date.

Dear: Click or tap to enter text recipient name

**This notice has important information about your right to continue your coverage in the Dental, Vision and/or GAP plan provided or administered by Sun Life Assurance Company of Canada or its affiliates[[1]](#footnote-2) (the Plan), as well as other health coverage options that may be available to you, including coverage through the Health Insurance Marketplace**®[[2]](#footnote-3)**. To sign up for Marketplace coverage visit** [**www.HealthCare.gov**](http://www.healthcare.gov/) **or call** **1-800-318-2596** **(TTY: 1-855-889-4325). You may be able to get coverage through the Health Insurance Marketplace® that costs less than continuation coverage after the premium assistance expires. People in most states use** [**www.HealthCare.gov**](https://www.healthcare.gov/) **to apply for and enroll in Marketplace coverage; if your state has its own Marketplace platform, you can find contact information here:** [**www.HealthCare.gov/marketplace-in-your-state/**](https://www.healthcare.gov/marketplace-in-your-state/)**.**

Please read the information in this notice very carefully before you make your decision. If you choose to elect continuation coverage, you should use the election form provided later in this notice.

The American Rescue Plan Act of 2021 (ARP) provides temporary premium assistance for continuation coverage and, where the employer elects to offer the option, an opportunity to switch to a different health plan option offered by your employer (see below for more information). Premium assistance is available to certain individuals who are eligible for continuation coverage due to a qualifying event that is a reduction in hours or an involuntary termination of employment. If you qualify for premium assistance, you need not pay any of the continuation coverage premium otherwise due to the plan. This premium assistance is available from April 1, 2021 through September 30, 2021. If you continue your continuation coverage beyond this time, you may have to pay the full amount due.

To determine whether you are eligible for premium assistance under the ARP, carefully review this notice and the attached document titled “Summary of the COBRA Premium Assistance Provisions under the American Rescue Plan Act of 2021.” **If you believe you are eligible, complete the “Request for Treatment as an Assistance Eligible Individual” and return it to your former employer with your completed Election Form.**

To elect continuation coverage, follow the instructions on the enclosed Election Form and submit it to us.

If you do not elect continuation coverage, your coverage under the Plan will end on Click or tap to enter the date current coverage will enddue to:

End of employment (voluntary)

End of employment (involuntary)

Reduction in hours

Divorce or legal separation

Death of employee

Entitlement to Medicare

Loss of dependent child status

Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Each person in the category(ies) checked below is entitled to elect continuation coverage, which will continue group health care coverage under the Plan for up to 18 months (36 months in CA, 12 months ME, UT)

Employee or former employee

Spouse or former spouse

Dependent child(ren) covered under the Plan on the day before the event that caused the loss of coverage

Child who is losing coverage under the Plan because he or she is no longer a dependent under the Plan

If elected, continuation coverage will begin on Click or tap to enter the date mini-COBRA/continuation coverage begins and can last until Click or tap to enter the date mini-COBRA/continuation eligibility ends*.*

Continuation coverage will cost: Enter amount each qualified beneficiary will be required to pay for each option per month of coverage and any other permitted coverage periods.If you qualify as an “Assistance Eligible Individual” this cost will be treated as having been paid in full from April 1, 2021 through September 30, 2021. You do not have to send any payment with the Election Form. Important additional information about payment for continuation coverage is included in the Request for Treatment as an Assistance Eligible Individual.

If you have any questions about this notice or your rights to continuation coverage, you should contact Enter name of person at the employer who can assist with questions for mini-COBRA/continuation coverage (include telephone # and address)

## Continuation Coverage Election Form

**Instructions: To elect continuation coverage, complete this Election Form and return it to us. Under applicable law, you have 60 days after the date of this notice to decide whether you want to elect continuation coverage.**

**Send completed Election Form to: Click or tap to enter the employer name and address**

**This Election Form must be completed by Click or tap to enter the date election must be made by.. If mailed, it must be post-marked no later than Click or tap to enter the date the election must be post-marked, if mailed.**

**If you do not submit a completed Election Form by the due date shown above, you will lose your right to elect continuation coverage. If you reject continuation coverage before the due date, you may change your mind as long as you furnish a completed Election Form before the due date. However, if you change your mind after first rejecting continuation coverage, your continuation coverage will begin on the date you furnish the completed Election Form.**

**Read the important information about your rights included in the pages after the Election Form.**

I (We) elect continuation coverage in the Dental, Vision and/or GAP Plan provided or administered by Sun Life Assurance Company of Canada (the Plan)as indicated below:

Name Date of Birth Relationship to Employee SSN (or other identifier)

a.

Coverage option(s): Dental  Prepaid Dental/DHMO  Vision  GAP 

b.

Coverage option(s): Dental  Prepaid Dental/DHMO  Vision  GAP 

c.

Coverage option(s): Dental  Prepaid Dental/DHMO  Vision  GAP 

Signature Date

Print Name Relationship to individual(s) listed above

Print Address Telephone number

## Important Information about Your Continuation Coverage Rights

### What is continuation coverage?

State law requires that most group health insurance coverage (including Dental, Vision and/or Gap) give employees and their families the opportunity to continue their coverage when there is a “qualifying event” that would result in a loss of coverage under an employer’s plan. Depending on the type of qualifying event, “qualified beneficiaries” can include the employee (or retired employee) covered under the group health plan, the covered employee’s spouse, and the dependent children of the covered employee.

Continuation coverage is the same coverage that the Plan gives to other participants or beneficiaries under the Plan who are not receiving continuation coverage. Each qualified beneficiary who elects continuation coverage will have the same rights under the Plan as other participants or beneficiaries covered under the Plan.

### How long will continuation coverage last?

### Group health care coverage can continue under the Plan for up to 18 months (36 months in CA, 12 months ME, UT)

### How can you elect continuation coverage?

To elect continuation coverage, you must complete the Election Form and furnish it according to the directions on the form.

In considering whether to elect continuation coverage, you should take into account that a failure to continue your group health coverage may affect your special enrollment rights for group health plans under federal law. You have the right to request special enrollment in another group health plan for which you are otherwise eligible (such as a plan sponsored by your spouse’s employer) within 30 days after your group health coverage ends because of the qualifying event listed above. You will also have the same special enrollment right at the end of continuation coverage if you get continuation coverage for the maximum time available to you.

### How much does continuation coverage cost?

In determining premiums, the plan can include the costs paid by employees and the employer, and may add an additional 2 percent for administrative costs.

The ARP reduces the continuation coverage premium for certain individuals. Premium assistance is available to certain individuals who experience a qualifying event that is a reduction in hours or an involuntary termination of employment. If you qualify for premium assistance, you need not pay any of the continuation coverage premium otherwise due to the issuer. This premium assistance is available from April 1, 2021 through September 30, 2021. If your continuation coverage lasts beyond September 30, 2021, you may have to pay the full amount due if you choose to continue your continuation coverage. Review the attached “Summary of the COBRA Premium Assistance Provisions under the American Rescue Plan Act of 2021” for more details, restrictions, and obligations as well as the form to complete to establish eligibility. However, when your premium assistance ends, you may qualify for a special enrollment period to enroll in coverage through the Health Insurance Marketplace® (see section on “other coverage options” below).

### When and how must payment for continuation coverage be made if I am not eligible for the premium assistance or if I continue my continuation coverage past September 30, 2021?

You will need to send the applicable premium monthly to your former employer and they will forward to Sun Life.

You may contact Enter appropriate contact at the employer responsible for continuation coverage administration under the Plan to confirm the correct amount of your payment or to discuss payment issues related to the premium assistance.

Your payment(s) for continuation coverage (if you are not eligible for premium assistance or if you continue on such coverage past September 30, 2021) should be sent to:

Enter employer address for appropriate COBRA/continuation payment (if individual is not an Assistance Eligible Employee)

### Are there other coverage options besides continuation coverage?

Yes. There may be other coverage options for you and your family through the Health Insurance Marketplace®, Medicare, or other group health plan coverage options (such as a spouse’s plan) through what is called a “special enrollment period.” You may apply for and enroll in Medicaid at any time. If you are not eligible for premium assistance under the ARP, some of these options may cost less than continuation coverage. If you are eligible for other group health coverage, such as through a new employer’s plan or a spouse’s plan (not including excepted benefits, a QSEHRA or a health FSA), or if you are eligible for Medicare, you are not eligible for ARP premium assistance. However, if you have individual market health insurance coverage, like a plan through the Marketplace, or if you have Medicaid, you may be eligible for ARP premium assistance if you elect continuation coverage. You will not be eligible for a premium tax credit, or advance payments of the premium tax credit, for your Marketplace coverage once you elect COBRA continuation coverage, or for months during which you remain an employee but are eligible for COBRA continuation coverage with premium assistance because of a reduction of hours. If you’re eligible for Medicare, consider signing up during its special enrollment period to avoid a coverage gap when your COBRA coverage ends and a late enrollment penalty.

You should compare your other coverage options with continuation coverage and choose the coverage that is best for you. For example, if you move to other coverage you may pay more out of pocket than you would under continuation coverage because the new coverage may impose a new deductible. Also, keep in mind that if you elect continuation coverage with premium assistance, then you may qualify for a special enrollment period to enroll in Marketplace coverage when your premium assistance ends. You may use the special enrollment period to enroll in Marketplace coverage with a premium tax credit if you end your continuation coverage when your premium assistance ends and you are otherwise eligible.

When you lose job-based health coverage, it’s important that you choose carefully between continuation coverage and other coverage options, because once you’ve made your choice, it can be difficult or impossible to switch to another coverage option until the next available open enrollment period.

## For more information

This notice does not fully describe continuation coverage or other rights with respect to your coverage. More information is available from your employer.

If you have any questions concerning the information in this notice, your rights to coverage you should contact your employer.

For more information about your rights under state law, contact your state Department of Insurance.

## Keep Your Plan Informed of Address Changes

In order to protect your and your family’s rights, you should keep your employer informed of any changes in your address and the addresses of family members. You should also keep a copy, for your records, of any notices you send to your employer or Sun Life.

1. This notice is intended for use for coverage issued or administered by Sun Life Assurance Company of Canada, or one of its affiliates, including Sun Life and Health Insurance Company (U.S.), UDC Dental California, Inc., United Dental Care of Colorado, and United Dental Care of Utah. Group Hospital Confinement Indemnity “Gap” insurance is underwritten by Fidelity Security Life Insurance Company (Kansas City, MO), and is administered by Sun Life Assurance Company of Canada (Wellesley Hills, MA). [↑](#footnote-ref-2)
2. Health Insurance Marketplace® is a registered service mark of the U.S. Department of Health & Human Services. Stand alone vision or GAP plans are not offered through the Marketplace To shop for stand-alone vision or GAP plans, contact an insurance agent or broker, or search for plans online. You can also contact your state’s Department of Insurance. [↑](#footnote-ref-3)