	Notice of Termination To Carrier	Notice of Right tc Continue	Period Peri	ection od nds
COBRA CONTINUATION RIGHTS				
<ul><li>-federally mandated continuation of health benefits</li><li>-applicable to employee groups of 20 or more</li></ul>	within <u>30</u> days of termination of employment	from carrier within 14 days of receipt of termination notice; may be more than 14 days if multi- employer plan	not later than date coverage would otherwise terminate	not e 60 da cove: to to afte: employe notio
NYS CONTINUATION RIGHTS  (follows termination of employment)  -applicable to any group health insurance not subject to federal right to continue under COBRA (generally employee groups of fewer than 20)  -includes individual contracts issued by Article 43 corporations on a community rated basis	Notice of continuation privilege required to be provided in the certificate of coverage.  Separate notification after the job dismissal is not required.  Employee/member must request ontinuation in writing.		within 60 days following employment termination date or date employee given notice of right of continuation, whichever is late	cove: due tion
NYS CONVERSION RIGHTS (follows 18 month continuation period)	Notice of conversion privilege should be in insurance contract or certificate. Must also be provided to the insured within 15 days of termination of coverage under the group contract. If notification is after 15 days but less than 90 days, time to exercise conversion privilege is extended for 45 days after giving notice.			for i group cont: after insu: for g <u>45</u> da termi emplo