

# 2022–2023 COBRA/Cal-COBRA Status Questionnaire

As your Insurance Administrator, it is very important that we identify your COBRA status for each year. To establish Federal COBRA or Cal-COBRA status for the **2022-2023** year, please read the statement below and choose one of the COBRA options listed.

Your company's COBRA status is based on the total number of employees on payroll at your company, not on the total number of employees enrolled in the insurance plan. Do not count Owners or Officers of the company unless they appear on the DE-9C.

To calculate part-time employee hours to full-time employee hours: Add all part-time hours, divide by full-time hours and add this number to your full-time employee count.

**Please complete and return this form to your administrator.**

**You must choose one option below.**

- |   |   |
|---|---|
| <input type="checkbox"/> Federal COBRA      | 20 or more employees on payroll (including union, part-time & temporary employees) for at least 50% of the working days of <b>2021</b>    |
| <input type="checkbox"/> Cal-COBRA          | 2 -19 employees on payroll (including union, part-time & temporary) for at least 50% of the working days of <b>2021</b>                   |
| <input type="checkbox"/> Non-COBRA Eligible | Sole Proprietor with no employees on payroll (including union, part-time & temporary) for at least 50% of the working days of <b>2021</b> |

\_\_\_\_\_  
Name of Company

\_\_\_\_\_  
Firm #

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name of Owner/Officer

\_\_\_\_\_  
Exchange / Association

\_\_\_\_\_  
Signature of Owner/Officer

\_\_\_\_\_  
Title

**Please complete and return this form even if you have no employees. Thank you.**

*A new Cobra/Cal-COBRA Status Questionnaire is required to be on file with us annually in order to enroll or re-enroll.*

## Important Information You Should Know

Whether your company is deemed Federal or Cal-COBRA, it is your responsibility as the employer, to notify your employees and their dependents of their rights to continuation of coverage. When an employee experiences a Qualifying Event, (i.e., termination of employment) and you had a minimum of two employees on payroll (including union, part-time, and temporary employees) for at least 50% of the previous working year, that employee is eligible for COBRA continuation. This questionnaire helps us administer COBRA with required notices and report to the appropriate carrier the type of COBRA to be offered.

If the owner(s) of your company have ownership in multiple companies, the COBRA/Cal-COBRA status for all companies may be affected. Federal law in many instances regarding multiple/common ownership is very complex. If your company falls into a multiple/common ownership category, legal counsel is strongly advised. While each administrator endeavors to provide a simple guideline, we make no representation as to legal status of your company with regard to COBRA/Cal-COBRA.