**Section** **2210.430 Continuation of Coverage**

a) Election of Continuation Coverage.

1) Eligible Members who lose coverage due an event identified in subsection (b) may elect to continue coverage for a specified period of time in accordance with the requirements of federal law and sections 367.2, 367e, and 367e.1 of the Illinois Insurance Code [215 ILCS 5].

2) A Member electing continuation coverage must make a written election to continue coverage within 60 calendar days after the later of the date coverage is terminated due to a qualifying event or the date the Member or Dependent is sent notice of the right to elect continuation coverage.

3) A Member electing to enroll in continuation coverage must submit payment of all premiums due for such coverage within 45 calendar days of the date of election.

4) A Member who timely elects continuation coverage and submits payment of all premiums due will not have a gap in coverage and will have coverage reinstated retroactive to the date of termination.

5) The Agency shall establish the monthly premium rates to be paid by Members for continuation coverage. These rates are published in the CMS Benefit Program Books available at https://cms.illinois.gov/benefits/stateemployee/benefitsbooks.html

b) Qualifying Events for Continuation Coverage.

1) An Employee may elect continuation coverage under the Program upon the occurrence of any of the following events:

A) Termination of Employee’s employment with the State for any reason other than gross misconduct;

B) Termination of Employee’s disability benefits;

C) Expiration of Employee’s maximum leave of absence period; or

D) Loss of eligibility to participate in the Program due to a reduction in work hours.

2) A Dependent will be eligible to elect continuation coverage under the Program upon the occurrence of any of the following events:

A) Employee’s termination of employment with the State;

B) Employee’s termination of disability benefits;

C) Expiration of the Employee’s maximum leave of absence period;

D) Employee’s loss of eligibility to participate in the Program due to a reduction in work hours;

E) Divorce, annulment, dissolution of civil union partnership, or legal separation from the Employee;

F) Loss of eligibility as a dependent child or domestic partner; or

G) Death of the Employee.

3) A Dependent whose coverage is voluntarily dropped by an Employee shall not be eligible to elect continuation coverage.