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Employer Portal Quick Start Guide - COBRA Administration

My TPA Online is a secure web portal designed to help you work more efficiently with Benefit Extras on all aspects of **COBRA administration**. This guide provides an introduction to navigating the portal and understanding key COBRA concepts. While using the site, you will also have access to additional on-screen help and resources that go beyond this overview.

HOW TO ACCESS THE COBRA ONLINE PORTAL

1. **Visit the Benefit Extras website**

Go to www.benefitextras.com, select the Employers tab, and choose the COBRA My TPA Online! Portal at the bottom of the page.

2. **Enter your login credentials**

Use the username and password provided by Benefit Extras, then click Log In.

3. **Access your dashboard**

After logging in, you will be directed to your personalized Dashboard where you can begin managing COBRA activity.

4. **Update your password**

On your first login, go to the Group Info page and change your password to a unique, secure option known only to you.



NOTE: Only the most recent **12 months of reports** will be available on the portal so be sure to download and save them regularly.

My TPA Online!

Thursday, May 28, 2026

Dashboard:

Company: ABC Company

User Name: BXPRES99 [Logout]

System Message

Database last updated: 5/6/2026

How To Use This Site

This site has been separated into five (5) categories:

Dashboard
When administrating COBRA, the Dashboard keeps you informed – TPA Contact Information, The Queue, and System Messages.

Group Info
Be sure that your information is always up-to-date from the Group Info page – Your Login Credentials, Company Information, and Insurance Plan Information can be found here. If you find erroneous information, please contact your Administrator.

Events
Enter COBRA related events from Events page – Employee's Eligible for Benefits, COBRA Qualifier's, Voluntary Removal from a Health Plan, Add a Dependent, and Change the address of an employee.

Reports
Quickly find what you are looking for from the Reports page – Active Employees, COBRA Qualifiers, Past Due Payments, and more.

Help
Get detailed help about each of the above categories.

Queue

The queue is empty.

Legend:

 Qualifier

 Voluntary Remove

 Added Dependent

 New Hire

 Address Change

 Plan Change

Contact Us

**Representative:**
COBRA Department

**Phone Number:**
952-435-6858

**E-mail Address:**
cobra@benefitextras.com

System Message

The **System Message** area provides key updates about your site, including the current system status, the date of your most recent database update, and any errors that may have occurred while you were using the system.

The Queue

The **Queue** lists individuals along with the event associated with them (*i.e.* *New COBRA Qualifier*, *Address Change*, *etc.*). You can view or delete items from this list at any time. Each night, all items remaining in your queue are securely transmitted to Benefit Extras for processing.

Contact Us

The **Contact Us** section displays the contact information for Benefit Extras.

Group Info:

User Credentials

Your **User Credentials** are required to log into the system. It's important to keep this information current and secure. If you forget your password, you must have a valid email address so the system can send you a temporary replacement password. You can update your password at any time by entering your current (or temporary) password, followed by your new password.

User Credentials

Use the form below to change your password. Password requirements may be viewed by hovering over the [?] link.
If you ever forget your password, the system can email you a temporary password to your email address.

User Name: BxPres99

Last Login Date: 5/28/2026 8:49:25 AM

Old Password:

New Password: [?]

Confirm Password:

Email Address:

Update Information

Company Information and Insurance Information

The system uses information on both your company and insurance plan(s) when producing notifications and reports. If you find an error in either of these two sections, please notify Benefit Extras immediately.

Company Information

This is your company information and can only be edited by your administrator. If you find an error, please notify your Administrator.

Company Name: ABC Company

Mailing Address: 999 Anywhere Street

Address Overflow:

City, State and Zip Code: Somewhere, MN 55555

Company Contact: Jane Doe

Title: HR Director

Insurance Information

Select an insurance plan from the drop-down box to review the plan's information and rates. If you find an error, please notify your Administrator.

Plan Name:

Plan Year: 01/01/2026 to 12/31/2026

Plan allows conversion: No

Loss of Dependent Status Age: 26

Loss of Student Status Age: 26

Rates
Note: Rates may exclude administration fees.

Single	2 Party	EE + Child(ren)	Family
200.00	400.00	300.00	600.00

Events:

I need help with...

Click any link in this section to view additional information and guidance on that topic.

Note: Please disregard “**Removing an employee and/or dependents from the group health plan (non-qualifying event)**”. This action is not considered a COBRA qualifying event and does not require COBRA administration.

Company: ABC Company

User Name: BXPRES99 [\[Logout\]](#)

I need help with...

Entering an employee who is eligible for benefits and needs an initial notice sent.

Making an address change to an already entered employee.

Adding a dependent to an employee's health plan.

Removing an employee and or dependents from the group health plan (non qualifying event).

Entering a new COBRA qualifier.

Deleting someone from the queue.

Changing my password.

Creating a report.

COBRA Qualifying Events

A 'Qualifying Event' is triggered when an employee, spouse or dependent child has lost coverage from the group health plan.

Please select the reason for the qualifying event.

Select the Reason for the Qualifying Event

Employee Events

The following events affect active employees and their dependents. Please select an option and click the 'Go' button to continue.

☐ Produce an Initial Notification for a new employee. [?]

☐ Rehire an Employee and produce an initial notice. [?]

☐ Change the address of an employee. [?]

☐ Add a dependent to the group health plan. [?]

☐ Employee Plan Change [?]

COBRA Qualifying Events

A **Qualifying Event** occurs when an employee, spouse, or dependent child loses coverage under the group health plan due to one of the situations listed below. When entering a qualifying event into the system, ensure you have the employee's personal details, plan information, and—if applicable—dependent information so your COBRA administrator can issue the required notice.

From the drop-down menu, select the reason for the qualifying event:

- Termination of Employment
- Involuntary Termination of Employment
- Reduced Work Hours
- Employee's Death
- Divorce or Legal Separation
- Loss of Dependent Status

Select the employee's name and click **Go**. If the employee does not appear in the list, choose **Not Entered** and then click **Go**.

COBRA Qualifying Events

A 'Qualifying Event' is triggered when an employee, spouse or dependent child has lost coverage from the group health plan.

Please select the reason for the qualifying event.

Termination of Employment (18 months) ▼

Select the name of the employee and then click the 'Go' button. If the employee is not in the list, select 'Not Entered' and then click the 'Go' button.

Not Entered ▼

Go

☒ Enrolled Employees ☐ All employees

The first page guides you through entering the COBRA qualifier's personal information. Once all required fields are completed, select **Next** to continue. If applicable, add each dependent who was enrolled in any group health plan at the time of the qualifying event, then choose **Next** to proceed. You will then complete the Insurance Information section. Indicate every plan in which the qualifier and any dependents were enrolled and select **Next** to move on to the **summary page (see sample on page 10)**.

Company: ABC Company

User Name: BXPres99 [\[Logout\]](#)

Termination of Employment

COBRA Qualifier Information

Section 1: Qualifying Event Reason and Date

Please enter the employee's qualifying event date.

Event Reason: Termination of Employment

Event Date [?]

Section 2: Employee's Information

Please complete this section with the employee's information.

Social Security # [?]

Last Name

First Name

Gender

Mailing Address

* Address Overflow

City

State

Date of Hire

Benefits Effective Date [?]

* Home / Cell Phone #

* M.I.

Date of Birth

Zip

*Items in Green are optional.

Next >>

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Additional Instructions for Entering Plan Information in the My TPA Online! Employer Portal

Basic & Dependent Life Insurance — When your life insurance coverage is based on a **flat dollar amount**, or when you offer a **basic dependent life insurance** benefit, these amounts will appear in the **Insurance Information** section. If they appear there, simply select the plan(s) that should be offered. The system will automatically calculate the premium.

If you select these benefits in this section, do **NOT** also enter them under Other Charges or in the Voluntary Life Insurance section. Example:

The screenshot shows the 'Insurance Information' section of the portal. It has a title bar with the text 'Insurance Information' and an information icon. Below the title bar, there is a instruction: 'Select the plan(s) the qualifier and any covered dependents were enrolled on prior to the qualifying event.' There are two dropdown menus: 'Medical:' with the selected value 'Not Enrolled in Medical' and 'Dental:' with the selected value 'Not Enrolled in Dental'. Below these are four checkboxes with labels: 'Basic Dependent Life Insurance', 'Basic Employee Life \$15,000', 'Basic Employee Life Insurance', and 'Basic Life Ins.'.

If your life insurance coverage is based on a **multiple of salary** rather than a flat dollar amount, you must enter both the **basic employee life insurance volume** and the **premium** under the **Other Charges** section. Make sure the volume is entered correctly (numbers only, no dollar sign) along with the correct premium, because whatever you enter in Other Charges is exactly what will appear on the individual's continuation notice.

Not all life insurance plans include AD&D under MN Life Continuation. It is the employer's responsibility to determine whether AD&D is included. If it is, be sure to include the AD&D premium in the monthly premium field.

If you want to include a **2% administration fee**, you must add it directly into the monthly premium amount you enter. If no premium is entered, the system will not transfer the information to Benefit Extras. Example:

The screenshot shows the 'Other Charges' section of the portal. It has a title bar with the text 'Other Charges'. Below the title bar, there is an instruction: 'In some instances, you may need to charge additional monthly fees for State Mandated Group Benefits. Check the box and enter the description and the monthly cost.' There is a table with two columns: 'Description of other Charges' and 'Monthly Premium'. The first row has a checked checkbox, the description 'Basic Life 46000', and the monthly premium '\$ 13.07'.

Voluntary Life Insurance — All voluntary life coverage must be entered in the **Voluntary Life Insurance** section. This is the only time this section should be used. Be sure to enter the **correct coverage volumes** (numbers only, no dollar sign) and **premium amounts**, because the information you enter here is exactly what will appear on the individual's continuation notice.

Not all life insurance plans include AD&D under MN Life Continuation. It is the employer's responsibility to determine whether AD&D is included in your plan. If it is, the AD&D premium must be added to the monthly premium field.

If you choose to include a **2% administration fee**, you must add it directly into the monthly premium amount you enter. If no premium is entered, the system will not transfer the information to Benefit Extras. Example:

Voluntary Life Insurance		
Federal COBRA does not mandate that an employer provide voluntary life insurance to qualified beneficiaries; however, some states have legislation requiring this. If your company is obligated to offer voluntary life, please complete the form below.		
Check the box, enter the death benefits amount and enter the monthly cost.		
Click if enrolled on Group Life	Death Benefits	Monthly Premium
☒ Employee	50,000	\$ 10.00
☒ Spouse	25,000	\$ 5.00
☒ Child(ren)	2,000	\$ 2.00

Life Portability/Conversion — If your policy uses **life portability or conversion** instead of MN Life Continuation, and Benefit Extras is responsible for sending those notices on your behalf, you should still enter the life insurance information so we know a notice must be issued. When entering this information, the **premium amount should be recorded as 0.01**.

Healthcare Flexible Spending Account (FSA)/Medical FSA — A healthcare FSA allows reimbursement of eligible medical expenses incurred by employees, their spouses, and dependents. Because a Health FSA is considered a group health plan, it is generally subject to COBRA unless it meets specific exemption criteria. When the FSA does qualify for limited COBRA obligations, the following rules apply:

- **COBRA does not need to be offered** to qualified beneficiaries who have **overspent** their FSA at the time of the qualifying event. An account is considered overspent when the individual has already been reimbursed more than they have contributed through payroll deductions.
- For individuals with **underspent** accounts (those who still have an available balance at the time of the qualifying event), COBRA **must be offered**, but coverage may end at the close of the plan year in which the qualifying event occurred.

To determine the FSA COBRA premium:

- Start with the individual's **total annual FSA election**.
- Subtract the **amount already contributed** through their last FSA payroll deduction.
- Divide the result by the **number of months remaining** in the FSA plan year (from the termination date through year-end).
- Multiply the monthly amount by the **2% COBRA administration fee** to determine the final monthly premium.

To include the **healthcare FSA** on an individual's continuation notice, you must **check the applicable box** and **enter the monthly premium** in the **Cafeteria Plan** section. Please note that a **dependent care FSA** is **not** considered a medical plan and is therefore **not subject to continuation**.

Cafeteria Plan	
Employees enrolled in a Cafeteria Plan Flexible Spending Account (FSA) should be offered the right to pay after-tax premiums and continue in the plan if their account has a positive balance at the time of their termination. Check the box and enter the total monthly reduction. If you would like to notify your plan administrator that the qualified beneficiary was enrolled on a FSA, but not offer them the right to continue on the plan due to a negative balance, check the box and enter 0.00 for the monthly fee.	
☐ Medical Flexible Spending Account	Monthly Premium \$

COBRA Special Circumstances — If the COBRA event you are reporting involves special circumstances, you must send an email to cobra@benefitextras.com immediately after entering the event to provide the necessary details. Special circumstances may include, but are not limited to, alternative payment arrangements, severance agreements, late notifications, and other unique situations.

Termination of Group Coverage — The Employer will be responsible for notifying the insurance carrier(s) of the initial termination(s) of coverage for any events entered via My TPA Online.

Summary Page

This page provides a summary of all the information you've entered. Review each section carefully, and when you're confident everything is accurate, select **Save** to send the information to the queue.

If you notice an error, select **Back** to make corrections, then return to this page to save your updates.

After the information has been saved in the queue, you may choose to print the page for your records.

The **Print** button will appear once you click **Save**.

Company: ABC Company

User Name: BXPres99 [\[Logout\]](#)

Termination of Employment

Please review the information prior to saving the data to the queue. If you find any mistakes, click the 'Back' button to correct them. After saving the data, you may print a copy for your records.

Employee's Name: Jane Doe

General Information:

COBRA Qualifying Event Reason:

Termination of Employment

COBRA Qualifying Event Date:

05/31/2026

Mailing Address:

999 Anywhere Street

City, State, Zip:

Somewhere, MN 55555

Insurance Plan Information:

Name: HealthPartners

Coverage: Age-Rated

Name: Basic Employee Life Insurance

Coverage: \$25,000

Name: Vision Plan

Coverage: Family

COBRA Qualifiers:

Jane Doe

Social/ID: xxx-xx-xxxx

Benefits Start Date: 04/01/1999

Date of Birth: 01/01/1960

John Doe

Social/ID: xxx-xx-xxxx

Benefits Start Date: 04/01/1999

DOB: 08/01/1959

<< Back

Save

Cancel

Employee Events

You can manage multiple employee-related updates within the **Employee Events** section also found under the **Events** tab. These events include:

- **Employee Eligibility** — Enter an employee who becomes eligible for benefits
- **Address Changes** — Update an employee's address
- **Dependent Additions** — Add a spouse or child
- **Employee Plan Change** — Add, remove, or update an employee's insurance plan information

Entering an Employee who becomes Eligible for Benefits

COBRA regulations require General Notices (Initial COBRA Notifications) to be sent to newly enrolled employees and their covered spouses. These notices must be issued within 90 days of enrollment. To enter an employee who becomes eligible for benefits:

- Begin by entering the employee's information. You must include the **Date of Hire** and **Benefits Effective Date**. These dates are stored for future reference if the employee or a dependent experiences a qualifying event. After completing the general information, select **Next** to proceed to dependent details.
- If you track dependent information, enter all available details. Key fields include the dependent's name, benefit start date (if different from the employee), birth date, and student status. If no dependents exist, click **Next** to move to the insurance information screen.
- Select the **plan name** and **coverage type** for the employee and any covered dependents. After choosing the appropriate plan, click **Next** to save and print the information.
- The employee's record will then be added to the processing queue.

Note: In addition to mailing COBRA Initial Notices, Benefit Extras also distributes HIPAA/CHIPRA Special Enrollment Notices (unless otherwise requested) with each COBRA Initial Notice. If we are notified that a newly benefits-eligible employee has waived all COBRA-eligible group health plan coverage, only the HIPAA/CHIPRA Special Enrollment Notice will be sent, since a COBRA Initial Notice is not applicable when coverage is waived. Similarly, if we are notified that an employee has elected only life insurance coverage, we will assume that all COBRA-eligible group health plan benefits have been waived. In this case, only the HIPAA/CHIPRA Special Enrollment Notice will be sent.

Company: ABC Company

User Name: BXPes99 [\[Logout\]](#)

Employee Eligible for Benefits

Employee Information

Complete this section with the employee's information.

Last Name

First Name

Gender

Mailing Address

Address Overflow

City

State

Social Security #

Date of Hire

Benefits Effective Date

Middle Initial

Date of Birth

Zip

[?]

[?]

[?]

Items in Green are optional.

Next >>

Changing the Address of an Employee

Maintaining accurate employee information is one of the best ways to ensure that **essential COBRA communications** reach the right individuals. Updating an employee's personal details **does not** trigger any COBRA-related events. To update an employee's address:

- Click **Change of Address**, select the employee from the drop-down list, and click **GO**.
- The employee's general information will appear, allowing you to edit the following fields:
 - Last Name
 - First Name
 - Middle Initial
 - Date of Birth
 - Gender
 - Mailing Address
 - Address Overflow
 - City State and Zip
- After making the necessary updates, click **Save** to send the information to the queue.
- Once saved, you will have the option to print the updated information.

Company: ABC Company

User Name: BXPres99 [\[Logout\]](#)

Address Change

Employee Information

A good way to ensure that essential COBRA information is received by your employees is to keep their personal information up-to-date. Note: Updating the employee's information will not trigger any COBRA related events.

Last Name	Doe	
First Name	Jane	Middle Initial
Gender	Female	Date of Birth 01/01/1960
Mailing Address	1234 Different Street	
Address Overflow		
City	Somewhere	
State	Minnesota	Zip 55555
Social Security Number	XXX-XX-4222 (Last 4 digits shown)	
Date of Hire	1/1/2000	
Benefits Effective Date	1/1/2000	

Items in Green are optional.

Cancel

Save

Adding a Dependent (Spouse or Child)

When a dependent is added to an employee's health plan, COBRA rules require that a **covered spouse** receives an Initial COBRA Notice. A **dependent child**, however, does **not** need to receive this notice when added. To add a dependent (spouse or child):

- Select **Add a Dependent to an Employee's Health Plan**, choose the employee from the drop-down menu, and click **GO**.
- Fill out the dependent information form. The employee's benefit start date will automatically populate. If you **do not** change this pre-populated date, the dependent will be added to the employee's file **without generating a notice**.
- Adjust the insurance plan information to reflect the new coverage level. After completing the form, click **Save**. You will then have the option to print the completed form.

NOTE: Adding a dependent child is optional. You will have another opportunity to update this information if a future COBRA qualifying event occurs.

Benefit Extras will be notified of the added spouse or dependent. A **COBRA General Notice** will be mailed **only to a newly added spouse**. Because Benefit Extras does not handle active-employee enrollment, the **employer** must submit all enrollment or change forms directly to the insurance carrier(s).

Company: ABC Company

User Name: BXPRES99 [Logout]

Add a Dependent to an Employee's Health Plan

Dependent Information

Use this form to add a Dependent/Spouse to an employee's file. If you are adding a spouse and the spouse has not been notified of their initial COBRA rights (required by law), be sure to change the benefits effective date and the system will produce an initial notification for them.

You are adding a dependent to Jane Doe's health plan.

What type of Dependent are you adding? Spouse

Name (First / Last)

Social Security Number [?]

Date of Birth

Benefits Effective Date 03/01/2013 [?]

Full-Time Student

Items in Green are optional.

Change the Insurance Plan Information

Update the insurance plan information to reflect the change in coverage.

Medical: Medical Plan

Coverage: Two Party

Dental: Dental Plan

Coverage: Single

☐ Vision Plan

Cancel

Save

Updating an Employee Plan Change

If your company recently completed an open enrollment period, you could update an employee's insurance plan information using this form. Changing an employee's insurance plan **does not** automatically send a notice or trigger a COBRA event. **If you want to send a General (Initial) COBRA Notice, complete the optional section on the form before selecting **Apply Changes**. Updating insurance plan information is optional unless a COBRA Initial Notice is needed.** You will also have another opportunity to update it when a qualifying event occurs. To update an employee's insurance plan:

- Select the first letter of the employee's last name or choose **All** to view all active employees.
 - A B C D E F G H I J K L M N O P Q R S T U V W X Y Z A l l
- Choose the employee's name from the drop-down list.
- Select **View** to display the employee's current plan information.

Name: Sammy Test Last four of Social / ID: 0000

Medical: Medical Plan Coverage: Single

Dental: Dental Coverage: Single

☐ A Basic Life Plan

☐ Basic Dependent Life Insurance

☐ Basic Employee Life \$15,000

☐ Basic Employee Life Insurance

☐ Basic Life Ins.

☐ ICHRA - Initial Notice Purpose ONLY

☐ Initial Notices Purposes Only

☐ Initial Notices Purposes ONLY!

☐ Lincoln Life Conversion

☐ Medical FSA

☐ Newly Eligible (Waived Med/Dent/Vision)

☐ PEIP Subsidized

☐ PreferredOne Subsidized

☐ Vision Plan

Optional and Generally NOT Necessary

Do not include a benefit start date unless the employee has never received a General (Initial) COBRA Notice. This notice is typically sent once at the start of coverage and is not required when switching plans. If you determine it is necessary, check the box and enter the benefits start date.

☐ Check the box to enter the benefit start date.

Cancel Apply Changes

Reports:

The **Reports** page allows you to run reports using information entered by Benefit Extras or data imported from **My TPA Online**. If you recently added a new COBRA qualifier and it is still in the queue, it will not appear on the **COBRA Qualifying Event Report** until your administrator processes the request. You can view the date of your most recent data update on your **Dashboard**.

To run a report, follow these instructions:

- Choose the report you want to run from the **Select Report** drop-down menu.
- Select the timeframe for the report (if applicable).
- Choose how you would like the report to be sorted.
- Click **GO** to generate the report.

The report will display on your screen.

If you want to print the report, click the **Printer** icon at the top of the page. A printer-friendly version will open in a new window. To save the report as a CSV file for use in Excel, click the **CSV** icon.

Available reports include:

- Initial Notice Report
- Qualifying Event Report
- Qualifer Eligibility Report
- COBRA Tracking Report
- Paid Through Report
- Past Due Report
- COBRA Termination Report
- Notifications Sent Report
- Insurance Enrollment Report
- Qualifier Eligibility Report with Census Data
- Monthly Reports
- Funding Reports

Company: ABC Company

User Name: BXPres99 [\[Logout\]](#)

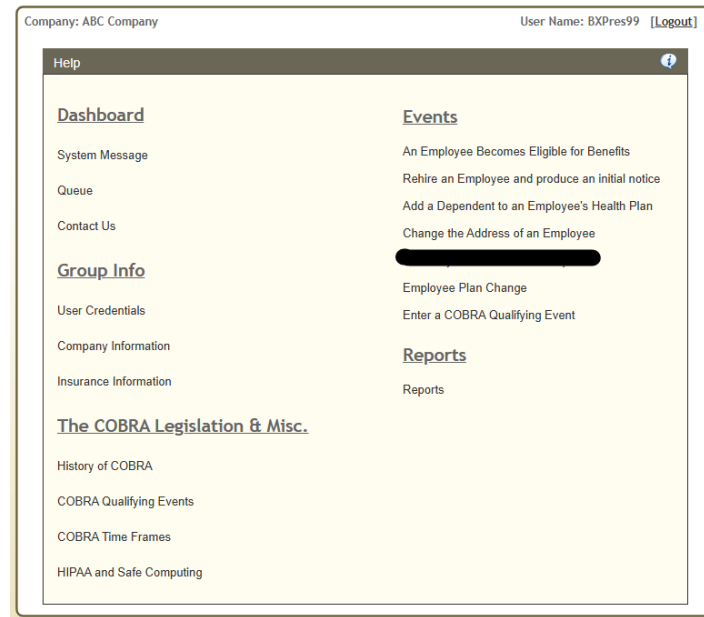
Reports 

Select the desired report from the drop-down box and then click the 'Go' button to produce the report.

Select Report:

Select A Report ▼

Help:



HIPAA and Safe Computing

It is important for the integrity of the data stored on our server to maintain certain system-wide policies. Below you will find information on some strictly enforced policies and some recommended procedures.

What we have put in place:

- **Password assignment procedures** to ensure secure creation and distribution of credentials.
- **Password change management procedures** to maintain ongoing account security.
- **A policy prohibiting the sharing of passwords or sign-in information** under any circumstances.
- **A policy requiring individually assigned login credentials** so system managers can accurately determine and document user activity, including who accessed data and when.

What you should do:

- **Change passwords regularly** to maintain strong account security.
- **Establish a reliable login and password policy** to promote trust and protect system access.
- **Use logins and passwords that properly verify identity** and ensure they are updated routinely. Passwords must never be shared or disclosed.
- **Use unique User IDs** for every individual. Each person must have their own User ID, and the password cannot match the User ID.
- **Log off when the system is not in use** to prevent unauthorized access.

Secure Sockets Layer (SSL)

My TPA Online uses **Secure Sockets Layer encryption** to protect all data transmitted through its web pages. An SSL certificate stored on our server contains both a **public key** and a **private key**. The public key encrypts information, while the private key decrypts it. When a browser connects to a secure domain, an **SSL handshake** takes place. This process authenticates both the server and the client, establishes the encryption method, and generates a unique session key for secure communication.

Encrypted Social Security Numbers

My TPA Online uses encryption when storing social security numbers on our server. Encrypting all social security numbers adds an extra layer of protection on top of SSL.

Review of COBRA Procedures & Month-End Reports

IMPORTANT: To ensure efficient COBRA administration, Benefit Extras must receive complete and accurate information promptly. Your careful review of all submitted forms and correspondence is essential and greatly appreciated.

It is recommended that you regularly audit your monthly COBRA activity reports against the billing statements you receive from your insurance carriers. This helps confirm accurate enrollment and termination of COBRA participants. Most carriers only issue premium credits for the current and previous month, so any discrepancies must be reported to our office immediately. Benefit Extras cannot be held responsible for delays or inaction by the employer or the insurance carrier.

- **Monthly COBRA Reports** (reflecting the previous month's COBRA activity) are available on the portal by the **second business day of each month**.
- **Track all Initial Notice requests and COBRA Qualifying Events** throughout the month and verify them against the **COBRA General Notice Report** and **COBRA Qualifier Eligibility Report**. If someone is missing from the report, contact our office right away. Forms submitted during the last week of the month may not appear until the following month.
- **Employer responsibility for terminating coverage:** Effective July 1, 2019, Benefit Extras no longer terminates coverage with carriers during the qualifier's 60-day election period. Employers must notify carriers directly at the time of the qualifying event.
- **Review your group's insurance information** periodically. COBRA premiums are based on active employee rates plus a small administration fee (when applicable). To avoid billing errors, ensure the carriers and rates listed in the **Group Information** section match your current in-force plans. Report any discrepancies immediately.
- **Verify reinstated COBRA coverage** after a participant submits their COBRA Election Form and initial premium. Unless instructed otherwise, Benefit Extras reinstates coverage with the carrier. These individuals appear on the **COBRA Tracking Report**. Compare this list with your carrier billing statements to confirm enrollment.
- **Monitor COBRA premium payments** using the **Paid Through Date** and **Past Due Report**. COBRA participants pay the full cost of continuation coverage.
 - Under **Premium Option #1**, payments are forwarded to the employer weekly.
 - Under **Premium Option #2**, payments are remitted via ACH semi-monthly. Verify that the premiums collected match the amounts billed by your carrier (minus the 2% administration fee, if applicable). Report discrepancies immediately.
- **Review COBRA terminations** for reasons such as nonpayment, voluntary termination, or exhaustion of the continuation period. Unless instructed otherwise, Benefit Extras notifies the carrier when COBRA coverage ends. Terminated individuals appear on the **COBRA Termination Report**. Review your carrier billing statements to ensure you are no longer being billed and that any retroactive credits have been applied. Report discrepancies immediately.