

**COBEN PROGRAM  
PERMITTING EVENT CODES/DATES**

**EFFECTIVE DATES:**

**STANDARD**

First of the following month when correctly completed enrollment form is received at SCO by the 10th AND does not have to be returned to the agency for correction.

**MANDATORY**

First of the month following the event.

**APPENDIX A**

**NEWLY ELIGIBLE ENROLLMENTS   
EMPLOYEE NOT CURRENTLY ENROLLED IN COBEN CASH**

Permitting Event	Action Allowed	Permitting Event Code	Permitting Event Date	Effective Date of Action	Time Limit to File Document
<b>Newly eligible due to the following:</b> -Initial appointment (includes reinstatement following a permanent break in service) -Change in time base/designation from one that was not eligible to one that is eligible or a PI who changes to a permanent position with a time base of half-time or more -Marriage or commencement of domestic partnership -Divorce, termination of domestic partnership, legal separation, or annulment -Commencement of health/dental coverage provided through spouse, domestic partner, or other source (due to an employment status change) or survivor benefit -Return from an approved leave of absence (if employee was on leave during the entire open enrollment period) after the employee returns to work	Enroll as newly eligible	01	Date of event	Standard*	60 days after date of event

\*The last possible effective date for enrollment in CoBen Cash as newly eligible is December 1. Correctly completed documents must be received at SCO by November 10.

**COBEN PROGRAM PERMITTING**   
**EVENT CODES/DATES**

**APPENDIX A**

**CHANGES IN STATUS EVENTS**   
**EMPLOYEE CURRENTLY ENROLLED IN COBEN CASH**

<b>Permitting Event</b>	<b>Action Allowed</b>	<b>Permitting Event Code</b>	<b>Permitting Event Date</b>	<b>Effective Date of Action</b>	<b>Time Limit to File Document</b>
Loss or commencement of spouse's or domestic partner's employment	Cancel/change CoBen Cash elections, reenroll in prior health/dental plan(s)	05d*	Date of event	Standard	60 days after date of event
Loss of health/dental coverage provided through spouse, domestic partner, or other source (due to an employment status change)	Must cancel/change CoBen Cash elections, reenroll in prior health/dental plan(s) (New enrollments not allowed)	05e*	Date of event	Mandatory	60 days after date of event
Commencement of health/dental coverage provided through spouse, domestic partner, or other coverage (due to an employment status change)	May enroll in cash option as newly eligible or, if currently enrolled, may cancel/change CoBen cash option	05f*	Date of event	Standard	60 days after date of event
Newly married or commencement of domestic partner	Cancel/change CoBen Cash elections	17*	Date of event	Standard	60 days after date of event
Divorce, termination of domestic partnership, legal separation, or annulment	Cancel/change CoBen Cash elections, reenroll in prior health/dental plan(s)	27a*	Date of event	Mandatory	60 days after date of event
Death of spouse or domestic partner	Cancel/change CoBen Cash elections, reenroll in prior	27b	Date of event	Mandatory	60 days after date of event

\*For employees cancelling the CoBen Cash and enrolling into a state health and/or dental plan, the cancellation date for the FlexElect Cash enrollment must be the first of the month following the loss or cancellation of coverage.

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**APPENDIX A**

**CHANGES IN STATUS EVENTS**   
**EMPLOYEE CURRENTLY ENROLLED IN COBEN CASH**   
**CONTINUED**

<b>Permitting Event</b>	<b>Action Allowed</b>	<b>Permitting Event Code</b>	<b>Permitting Event Date</b>	<b>Effective Date of Action</b>	<b>Time Limit to File Document</b>
Move out of group practice plan service area	Enroll in a new plan, if your plan is no longer available. May cancel/change CoBen Cash elections (New enrollments not allowed)	34*	Date of move into an area not covered by the current carrier	Standard	31 days prior to move; no limit after move
New health and/or dental plan(s) in area where none was previously available	If currently enrolled in a medical and/or dental plan, may change coverage. May cancel or change Cash Option. (New enrollments not allowed)	35*	Date of event	Standard	60 days after date of event
Change in bargaining unit or employee designation (e.g., due to transfer, promotion) that results in a loss or gain of eligibility	Change health/dental plan(s) or cancel/change CoBen Cash election per union requirements	40*	Date of event	Standard	Time limit does not apply
Change in Time base and/or appointment that results in loss of CoBen Cash eligibility	Cancel CoBen Cash enrollment	41**	Date of event	Mandatory	Time limit does not apply
Retiree enrolls in health and/or dental plan 30 days prior to retirement	Cancel CoBen Cash enrollment and reenroll in a health and/or dental plan	88	Date of event	Mandatory	30 days prior to retirement

\*For employees cancelling the CoBen Cash and enrolling into a state health and/or dental plan, the cancellation date for the CoBen Cash enrollment must be the first of the month following the loss or cancellation of coverage.

\*\*CoBen Cash participants with a time base of half-time or more who change to PI status must cancel their CoBen Cash enrollment effective the first of the month  following their first full month as a PI.