



# Health Benefits

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## Voluntary Separation Program Exiting Employee Information

### General Benefits Questions

- ❑ **How long will health benefits be continued under the Voluntary Separation Program (VSP)?**
  - Health benefits will continue for a period of 6 months; October 1, 2025, through March 31, 2026, which is considered a severance period.
- ❑ **Which health benefits may be continued under the VSP?**
  - Eligible benefits include medical, dental, prescription drug and life insurance.
  - Only those benefits in effect on September 30, 2025, will be continued effective October 1, 2025.
- ❑ **Will coverage continue for my family?**
  - Eligible dependents who are enrolled on September 30, 2025, will continue to be covered as long as they remain eligible.
- ❑ **Will I need to complete a form to continue health benefits under the VSP?**
  - If accepted into the VSP, your existing medical, dental, prescription drug and life insurance will continue automatically.
  - Information on continuing a health care flexible spending account and the required form is outlined below.
- ❑ **How will the health benefit premium(s) be paid?**
  - The State of Maryland will cover the full cost of health benefits during the severance period.
- ❑ **What happens if I am approved for the VSP and choose to retire on October 1, 2025?**
  - Your health benefits will continue throughout your severance period of 6 months regardless of your status.
  - The State health plan will remain primary to Medicare
  - End Stage Renal Disease (ESRD) rules remain applicable
  - If you qualify for retiree health benefits, the Employee Benefits Division (EBD) must receive the 2026 enrollment form between January 1 and March 31, 2026, to continue your health benefits as a retiree beginning April 1, 2026.
  - The Employee Benefits Division will contact you by January 31, 2026, with further instructions.
- ❑ **What happens if I am NOT approved for the VSP and choose to retire on October 1, 2025?**
  - Your health benefits as an active employee will end on September 30, 2025
  - If you qualify for retiree health benefits, EBD must receive the 2025 enrollment form within 60 days of the retirement date (October 1, 2025)
  - If Medicare-eligible, Medicare Parts A, B and D effective dates must align with your retirement date as Medicare will become primary to the State health plan
  - For full retirement details, please contact your Agency Retirement Coordinator



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❑ **When will my health benefits end?**

- If you were enrolled in the State Employee and Retiree Health and Welfare Benefits Program (the Program) as of September 30, 2025, your medical, prescription drug, dental and/or life insurance will be continued through March 31, 2026.
- If you were enrolled in accidental death and dismemberment coverage, and/or a health care or dependent care flexible spending account (FSA) on September 30, 2025, coverage ends on September 30, 2025. There is an option to continue a health care FSA through the end of the 2025 plan year under COBRA. Please see the section titled Flexible Spending Account Benefits Questions below.

❑ **When will I receive my COBRA notification?**

- The State of Maryland will send you a Notice of Continuation of Coverage (COBRA) Rights to continue group health, prescription drug and dental plan coverage within 10 days of your last date of coverage under the VSP (March 31, 2026). If you enroll in COBRA benefits, the State of Maryland will provide payment coupons and an online payment portal with instructions for processing payments in a timely manner. There will be no reminders about COBRA coverage deadlines or about COBRA payments, so you will need to carefully comply with the requirements in order to maintain COBRA coverage.

❑ **How much time do I have to decide if I want to continue my benefits under COBRA?**

- You have 60 days from the date of your COBRA notification or **March 31, 2026**, to elect continuation of coverage. Coverage will be retroactive to the date of loss but please be advised that your coverage will not be reinstated until your **COBRA** election form and **first** payment is received. Please allow time for processing. This does not count as a “break in service” for coverage as your coverage will be retroactive to date coverage terminated, **April 1, 2026**.
- If you have medical appointments that need to be scheduled before your COBRA enrollment has been activated, and you can’t wait until your enrollment has been completed, please call the EBD for assistance, as you may need to pay for your services. Once your COBRA enrollment has been completed, you can submit the appropriate documentation for reimbursement.

❑ **How long can I continue my COBRA coverage?**

- Generally, you can continue coverage for 18 months, or until you become covered under another group plan, which ever is earlier.

❑ **Can I get COBRA coverage for just one of my covered dependents?**

- Yes. You can choose to cover only certain plans for yourself and/or any covered dependent.

❑ **What benefits can I continue under COBRA?**

- According to federal law, you and/or any covered dependent may continue your **current** medical, prescription drug and/or dental plans.
- You may apply for portability or conversion of your employer sponsored life insurance plan into an individual life insurance policy. MetLife will contact you directly via regular mail.

❑ **If I elect COBRA, will I have a lapse in coverage?**

- No, upon bringing your payments up to date, your records will be brought up to date, and no lapse will be recorded.



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- ❑ **How much will COBRA cost and when do I start making my COBRA payments?**
  - COBRA premiums are dependent on your elections. In order to expedite reinstatement of your coverage, we recommend including all retroactive premiums at the time of enrollment.
  - 2026 COBRA rates will be available in January 2026 at <https://dbm.maryland.gov/benefits/Pages/default.aspx>
- ❑ **If I elect COBRA and it has not begun, what should I do if I need medical attention in the meantime?**
  - You should see your physician (as always, you should ensure that (s)he is covered by your plan) and pay out-of-pocket fees. Keep all your receipts, and once reinstated, submit all receipts with a reimbursement form to the provider. Upon review and approval, they will reimburse you for visits and prescriptions.

## Flexible Spending Account Benefit Questions

- ❑ **What happens to the funds in my Flexible Spending Account (FSA)?**
  - You have 90 days from your date of termination to file a claim for the Health Care FSA or the Dependent Care FSA. All claims submitted must be for services and expenses incurred on or before the last date worked or your date of termination; for additional questions on your FSA Account, please contact the program administrator, P&A Group. Any funds remaining in your account for which no eligible claims have been submitted within the 90 days of your termination will be forfeited.
  - **COBRA Health Care FSA** - If you are currently participating in the Health Care FSA plan, and if you have a positive account balance, you may elect to continue participating in the Health Care FSA through COBRA. You'll receive a COBRA Election - Health Care FSA form, which you can complete and return to EBD. COBRA FSA coverage ends on the last day of the current plan year, which is December 31, 2025 and you have 90 days from this date to submit any claims that were incurred during this COBRA extension period.
  - **COBRA Dependent Care FSA** - IRS regulations do not allow you to continue participation in the Dependent Day Care FSA through COBRA.

## Life Insurance Policy Questions

- ❑ **What will happen to my Life Insurance?**
  - MetLife will give you the option to elect portability of your policy to an individual life insurance policy without disability or accidental death and dismemberment benefits. MetLife does not require proof that you are insurable during the application period. **The application must be returned directly to MetLife within 31 of your termination date.**

This Exiting Information Sheet represents a brief summary of the health benefit options available to departing employees. It is not intended to provide a complete description of each plan. Please refer to the Summary Plan Description and any other official documents for complete information about each benefit. Although every effort has been made to ensure information in this information sheet is accurate, the provisions of the plan documents will govern in case of any discrepancy. The State Employee and Retiree Health and Welfare Benefits Program (The Program) is subject to review and may be modified or terminated at any time for any reason. This information sheet does not create a contract of employment between The Program and any employee.



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Plan Contacts	Phone	Website
<b><u>Medical Plans</u></b>		
CareFirst BlueCross BlueShield	800-225-0131	<a href="http://www.carefirst.com/statemd">www.carefirst.com/statemd</a>
Kaiser Permanente	855-839-5763	<a href="http://my.kp.org/Maryland">my.kp.org/Maryland</a>
United Healthcare	800-382-7513	<a href="http://www.uhcmaryland.com">www.uhcmaryland.com</a>
<b><u>Prescription Drugs</u></b>		
MedImpact	844-348-8508	<a href="http://www.medimpact.com">www.medimpact.com</a>
<b><u>Dental Plans</u></b>		
Delta Dental	844-697-0578	<a href="http://www.deltadentalins.com/statemd">www.deltadentalins.com/statemd</a>
United Concordia	888-638-3384	<a href="http://www.unitedconcordia.com/statemd">www.unitedconcordia.com/statemd</a>
<b><u>Life Insurance</u></b>		
MetLife	866-574-2863	<a href="https://metlife.com/stateofmd">https://metlife.com/stateofmd</a>
<b><u>Flexible Spending Accounts</u></b>		
P & A Group	844-638-1900	<a href="https://padmin.com/md/">https://padmin.com/md/</a>

**State of Maryland**

**Employee Benefits Division**

**410-767-4775**