



**COMMONWEALTH OF VIRGINIA  
DEPARTMENT OF HUMAN RESOURCE MANAGEMENT**

**Group Administrator Memo #14-02**

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**To:** TLC Group Benefits Administrators  
**From:** State and Local Health Benefits Programs  
**Date:** July 9, 2014  
**Re:** Updated COBRA/Extended Coverage Election Notice

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As required by the Federal Government, a new and updated COBRA/Extended Coverage Election Notice is now available. This new form provides required information on the availability of Marketplace coverage as an alternative to COBRA/Extended Coverage. Please begin using the new Election Notice immediately.

Please note that in the past we have had different forms for Direct Bill and Group Bill. The new form is to be used for both types of coverage and you will need to include the appropriate information based on your plan status. Simply follow the directions **highlighted in yellow**.

Attached are both PDF and Word versions of the document for your convenience. They will also be available on the TLC web site, [www.thelocalchoice.virginia.gov](http://www.thelocalchoice.virginia.gov) under Forms in the near future.

If you have questions, please feel free to contact Walt Norman, Program Manager for The Local Choice. His phone and email information follow:  
[walter.norman@DHRM.virginia.gov](mailto:walter.norman@DHRM.virginia.gov), (804) 786-6460.