Terminating Employee Benefit Coverage

Key items to know regarding terminations:

- Health Care and Benefits will collect the employee benefit cost and the state share from each agency upon employee termination.
- Coverage will automatically continue through the end of the month the employee terminates.
- Depending on an employee's termination date, he or she might have the option to remove dependents and cancel all optional benefits. (These dates are in blue rows below). Employees can continue all coverage through the appropriate month or reduce their benefits to the core plan (medical, dental, and basic life for self only). If an employee chooses to cancel all optional benefits on the 15th they must sign and return the "Terminating Optional Benefits Prior to the End of the Month" form prior to their last day worked. This will cancel all optional benefits dependent coverage, vision hardware coverage, all life benefits (except basic life), long term disability, and flexible spending accounts. Please be aware if you cancel your dependent's coverage, they will not be eligible to continue benefit coverage under COBRA.
- The information highlighted in blue below lets you know the pay periods which additional contributions will be collected from an employee's final check.
- Any questions please contact Jeanette Handelin at (406) 444-3886 or toll free at (800) 287-8266 ext 3886.

If Last Day Worked Between									
Pay Period Beginning	Pay Period Ending	Final Payday	Grandfather Coverage Ends	Non-Grandfather Coverage Ends	Benefits Paid	Will Collect 2 nd half of month	Date to let us know change in coverage	Date Optional Benefits End	FSA Coverage Ends
-0 0					Through				
12/26/2015	1/08/2016	1/20/2016	2/29/2016	1/31/2016	1/15/2016	Yes	1/14/2016	1/15/2016	1/31/2016
01/09/2016	1/22/2016	2/03/2016	2/29/2016	1/31/2016	1/31/2016	No	n/a	n/a	1/31/2016
1/23/2016	2/05/2016	2/17/2016	3/31/2016	2/29/2016	2/15/2016	Yes	2/11/2016	2/15/2016	2/29/2016
2/06/2016	2/19/2016	3/02/2016	3/31/2016	2/29/2016	2/29/2016	No	n/a	n/a	2/29/2015
2/20/2016	3/04/2016	3/16/2016	4/30/2016	3/31/2016	3/15/2016	Yes	3/10/2016	3/15/2016	3/31/2016
3/05/2016	3/18/2016	3/30/2016	4/30/2016	3/31/2016	3/15/2016	Yes	3/24/2016	3/15/2016	3/31/2016
*3/19/2016	4/1/2016	4/13/2016	4/30/2016	3/31/2016	3/31/2016	No	n/a	n/a	3/31/2016
4/2/2016	4/15/2016	4/27/2016	5/31/2016	4/30/2016	4/15/2016	Yes	4/21/2016	4/15/2016	4/30/2016
4/16/2016	4/29/2016	5/11/2016	5/31/2016	4/30/2016	4/30/2016	No	n/a	n/a	4/30/2016
4/30/2016	5/13/2016	5/25/2016	6/30/2016	5/31/2016	5/15/2016	Yes	5/19/2016	5/15/2016	5/31/2016
5/14/2016	5/27/2016	6/8/2016	6/30/2016	5/31/2016	5/31/2016	No	n/a	n/a	5/31/2016
5/28/2016	6/10/2016	6/22/2016	7/31/2016	6/30/2016	6/15/2016	Yes	6/16/2016	6/15/2016	6/30/2016
6/11/2016	6/24/2016	7/6/2016	7/31/2016	6/30/2016	6/30/2016	No	n/a	n/a	6/30/2016
6/25/2016	7/8/2016	7/20/2016	8/31/2016	7/31/2016	7/15/2016	Yes	7/14/2016	7/15/2016	7/31/2016
7/9/2016	7/22/2016	8/3/2016	8/31/2016	7/31/2016	7/31/2016	No	n/a	n/a	7/31/2016
7/23/2016	8/5/2016	8/17/2016	9/30/2016	8/31/2016	8/15/2016	Yes	8/11/2016	8/15/2016	8/31/2016
8/6/2016	8/19/2016	8/31/2016	9/30/2016	8/31/2016	8/15/2016	Yes	8/25/2016	8/15/2016	8/31/2016



(800) 287-8266 TTY (406) 444-1421 benefitsquestions@mt.gov benefits.mt.gov

^{*}Special Exceptions: If an employee's actual last day is April 1, 2016, the employee's coverage will go through April 1, 2016. If an employee's actual last day is September 2, 2016, the employee's coverage will go through September 2, 2016.

If Last Day Worked Between									
Pay Period	Pay Period	Final Payday	Grandfather	Non-Grandfather	Benefits	Will Collect	Date to let us know	Date Optional	FSA Coverage
Beginning	Ending		Coverage Ends	Coverage Ends	Paid	2nd half of	change in coverage	Benefits End	Ends
					Through	month			
*8/20/2016	9/2/2016	9/14/2016	9/30/2016	8/31/2016	8/31/2016	No	n/a	n/a	8/31/2016
9/3/2016	9/16/2016	9/28/2016	10/31/2016	9/30/2016	9/15/2016	Yes	9/22/2016	9/15/2016	9/30/2016
9/17/2016	9/30/2016	10/12/2016	10/31/2016	9/30/2016	9/30/2016	No	n/a	n/a	9/30/2016
10/1/2016	10/14/2016	10/26/2016	11/30/2016	10/31/2016	10/15/2016	Yes	10/20/2016	10/15/2016	10/31/2016
10/15/2016	10/28/2016	11/9/2016	11/30/2016	10/31/2016	10/31/2016	No	n/a	n/a	10/31/2016
10/29/2016	11/112016	11/23/2016	12/31/2016	11/30/2016	11/15/2016	Yes	11/17/2016	11/15/2016	11/30/2016
11/12/2016	11/25/2016	12/7/2016	12/31/2016	11/30/2016	11/30/2016	No	n/a	n/a	11/30/2016
11/26/2016	12/9/2016	12/21/2016	1/31/2017	12/31/2016	12/15/2016	Yes	12/15/2016	12/15/2015	12/31/2016
12/10/2016	12/23/2016	1/4/2017	1/31/2017	12/31/2016	12/31/2016	No	n/a	n/a	12/31/2016

