

COBRA Client Termination Request

Completed form can be submitted by email to COBRA@uhcservices.com. If you do not have internet access, please contact our Client Advocate Center at 1-800-318-5311. Please submit the termination request at least 30 days in advance of requested termination date. If you also have Reimbursement Services you would like to terminate, please submit the Reimbursement Client Termination Request form to cac@uhcservices.com.

Group Information

Group name: _____

Tax Identification Number: _____ Group Phone Number _____

Termination Information:

Note that terminating before end of contract period does not remove any obligation to pay monthly administration fees (if applicable) through contract period

Effective Date of Termination: _____ Note: usually last day of plan year.

All participant calls following the termination date will be redirected to the employer, or the new administrator if provided.

New Third Party Administrator: _____ Phone Number _____

Please note:

- For any retro terminations, some members may have made their premium payment for months after the effective date of your termination. If these funds had already been disbursed to your group via the monthly disbursement process, we would not be refunding those premiums to the members(s). Instead we would advise that you will either use these funds to credit the new COBRA administrator or to refund to the member(s) as needed.
- UnitedHealthcare Benefit Services does NOT notify the current members of the change to the new administrator. This is the responsibility of the employer or new administrator.
- All checks are cashed automatically at our bank, so if a member's payment comes in after the termination date, the funds will be applied to the member's account if monies are due for coverage prior to termination date.
- Any extra monies in member accounts that was not disbursed are refunded to the member. A minimum of 10 days after receipt of member payment is required to ensure sufficient funds, i.e. not non-sufficient funds. Member should receive their refund within 30 days from when termination was processed
- A standard report will be sent to the employer of current COBRA enrollees and notified members.
- Final disbursement of funds to the client will take place by the 15th of the month following the termination date if the termination is submitted in a timely manner.
- Eligibility reporting will cease as of the last day of service prior to the processing of the termination.

Authorization Information:

Printed name of authorized plan administrator: _____

Signature of authorized plan administrator: _____

Date: _____

Comments:
