



## TENNESSEE

# Regulatory Compliance and Resources by State

### STATE CONTINUATION

**Covered Employers:** All employers

**Qualified Beneficiaries:** Employees, spouses, and dependents that were continuously insured for at least three months immediately prior to coverage termination

**Qualifying Events:**

Termination of employee coverage for any reason, except for:

- Discontinuance of the policy
- The employee's failure to pay any required contribution
- The employee's eligibility of Medicare

**COBRA Duration:**

- In the event of termination, the fractional policy month remaining at termination, plus up to three additional months
- In the event of divorce or death of an insured spouse, the fractional policy month remaining at termination, plus up to 15 additional months
- For individuals whose coverage is terminated during pregnancy, the fractional month remaining at termination, plus at least six months after the pregnancy

**Maximum Premium Amount:** 100% of the premium

**Paid Family Leave:** Federal only FMLA

**State Employer Reporting:** None

**Paid Sick Leave:** None

**Mandatory 401(k):** None

**State Disability:** None

**Surprise Billing:** Only federal

Department of Insurance website: <https://www.tn.gov/commerce/insurance-division.html>

