

1. **Coverage Effective Date**

Coverage shall be effective as set forth below. See Appendix A for coverage period schedules for the current plan year.

a. **Eligible Permanent, Provisional and Temporary Exempt Employees of the City & County of San Francisco and Other Designated Employers**

| Eligibility Event Data             | Coverage Effective Date                              |
|------------------------------------|--|
| 1 <sup>st</sup> – 31 <sup>st</sup> | 1 <sup>st</sup> day of the following coverage period |

b. **Eligible Commissioners of the City & County of San Francisco**

| Eligibility Event Data             | Coverage Effective Date                              |
|------------------------------------|--|
| 1 <sup>st</sup> – 31 <sup>st</sup> | 1 <sup>st</sup> day of the following coverage period |

c. **Eligible Employees of the San Francisco Unified School District**

i. Monthly

| Eligibility Event Data             | Coverage Effective Date                              |
|------------------------------------|--|
| 1 <sup>st</sup> – 31 <sup>st</sup> | 1 <sup>st</sup> day of the following coverage period |

ii. Bi-Weekly

| Coverage Effective Date  |  |
|--|--|
| 1 <sup>st</sup> day of the pay period following the eligibility event date |  |

d. **Eligible Employees of the San Francisco Community College District**

| Eligibility Event Data             | Coverage Effective Date                              |
|------------------------------------|--|
| 1 <sup>st</sup> —15 <sup>th</sup>  | 16 <sup>th</sup> of the month                        |
| 16 <sup>th</sup> —31 <sup>st</sup> | 1 <sup>st</sup> day of the following coverage period |

2. **Coverage Termination Date**

Coverage shall terminate as set forth below:

a. **Eligible Permanent, Provisional and Temporary Exempt Employees of the City & County of San Francisco and Other Designated Employers**

| Eligibility Event Data             | Coverage Termination Date   |
|------------------------------------|---|
| 1 <sup>st</sup> – 31 <sup>st</sup> | Last day of the coverage period for which the employee premium contributions have been made in full |

**b. Eligible Commissioners of the City & County of San Francisco**

| Eligibility Event Data             | Coverage Termination Date   |
|------------------------------------|---|
| 1 <sup>st</sup> – 31 <sup>st</sup> | Last day of the coverage period for which the employee premium contributions have been made in full |

**c. Eligible Employees of the San Francisco Unified School District**

i. Monthly

| Eligibility Event Data             | Coverage Termination Date   |
|------------------------------------|---|
| 1 <sup>st</sup> – 31 <sup>st</sup> | Last day of the coverage period for which the employee premium contributions have been made in full |

ii. Bi-Weekly

| Coverage Termination Date                                       |
|---|
| Last day of the pay period following the eligibility event date |

**d. Eligible Employees of the San Francisco Community College District**

| Eligibility Event Data             | Coverage Termination Date   |
|------------------------------------|---|
| 1 <sup>st</sup> —15 <sup>th</sup>  | 15 <sup>th</sup> of the month   |
| 16 <sup>th</sup> —31 <sup>st</sup> | Last day of the coverage period for which the employee premium contributions have been made in full |

**e. Termination Date for Deceased Eligible Members**

| Coverage Termination Date                     |
|---|
| Coverage terminated as of the day after death |