

## **GREGG COUNTY**

Status: - Active - Waiting Period - Cobra / State - Retiree -Continuation	Gender	Date of Birth	Home Zip Code	Date of Hire / Retirement / COBRA start date	Medical Plan Selected Core / Buy-Up / Retiree	Level of Medical Coverage EE EE+Sp EE+Ch EE+Fam waive - other coverage waive- due to cost
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