

THE LOCAL CHOICE E-NEWS

Department of Human Resource Management State and Local Health Benefits Programs

August 30, 2011

Please note! The HIPAA Certificate of Coverage has been updated and is attached. Please use this version going forward. Thank you.

TRICARE Supplement Available to TLC Groups

A supplement to TRICARE health benefits will be offered as an option to The Local Choice groups beginning October 1, 2011. The supplement is open to employees and non-Medicare eligible retirees who are military retirees, eligible for TRICARE and eligible for the TLC health benefits program. Retirees must not be eligible for Medicare or continue to cover any dependents who are eligible for Medicare.

Administered by Association and Society Insurance Corporation (ASI), the supplement is part of a legislative package passed by the 2011 General Assembly and signed by Governor McDonnell to offer education and health care assistance to Virginia's military families.

Groups who are interested in offering this benefit to employees and retirees should contact ASI directly at 1-866-637-9911.

Updated COBRA/Extended Coverage Forms Provided

The following information is only for TLC groups with 20 or more employees that may offer COBRA/Extended Coverage:

Attached are revised COBRA/Extended Coverage forms to replace the current versions. These forms should be used beginning immediately and will be posted soon on the TLC website. The forms include:

- **Extended Coverage General Notice** that should be provided to all new participants in the program and their covered dependents. The General Notice outlines the benefits and requirements of Extended Coverage and should be mailed to each new participant via first class mail. Mailing is suggested in order to make sure that all covered family members have the opportunity to review and become familiar with the rights and requirements of Extended Coverage. As with all Extended Coverage communication, you should keep a log of correspondence with accurate information on what was sent, to whom and when the information was distributed. This log is your documentation of procedure and confirms your compliance should a member say that you did not provide the required information on a timely basis
- **Extended Coverage Election Form.** You should mail this form to all Qualified Beneficiaries who experience a COBRA Qualifying Event that causes a loss of health care coverage. Details and Qualifying Events are listed within the Election form.

The following form is also attached and applies to ALL TLC Groups:

- **HIPAA Certificate of Health Plan Coverage.** This form should always be provided when employees enroll or add a spouse for the first time to coverage, or terminate coverage. It should also be provided upon request.

All forms attached are in Word format so that you may fill in the blanks rather than having to retype each form. Please review these new forms carefully before you transfer them to your letterhead. There are numerous places throughout the forms that require you to enter information. In the Extended Coverage forms, these spots are marked with ***“Insert”*** and are in **bold red print**. After insertion on your letterhead, you will need to remove the bold and red color from the inserted sections.

As always, questions should be directed to Walter Norman, TLC Program Manager at (804) 786-6460 or by email to walter.norman@dhrm.virginia.gov.