

COMMONWEALTH OF VIRGINIA DEPARTMENT OF HUMAN RESOURCE MANAGEMENT

Group Administrator Memo #14-05

То:	TLC Group Benefits Administrators
From:	State and Local Health Benefits Programs
Date:	October 3, 2014
Re:	Dependents Who Lose Eligibility at the End of 2014

Dependent children who are otherwise eligible for The Local Choice Health Benefits Program lose eligibility at the end of the year in which they turn age 26. Dependents that are ineligible due to age will be removed from coverage effective January 1, 2015, and the employee's or retiree group participant's membership will be reduced appropriately. <u>Although we do not need a new Enrollment Form for this reduction, you may want</u> to have the member complete a form for your files. In the event of an audit, it could be helpful to provide a copy of the form along with our BES-Dependent-Age-26-Termination-Rpt.

Be sure to reconcile your payroll system to the Benefits Eligibility System (BES) to ensure that correct premiums are being deducted.

The Local Choice Health Benefits Program will continue to allow children who are incapacitated to remain covered dependents as long as they remain incapacitated and meet the eligibility criteria below:

- the child was covered by your health plan and the incapacitation existed prior to the loss of eligibility due to age,
- the dependent lives at home,
- the dependent is not married,
- the dependent receives more than one-half of his or her support from the employee,
- the dependent remains continuously covered, and
- the plan administrator approves continued coverage.

It is the employee's or retiree's responsibility to contact the plan directly for the necessary paperwork to begin the request for continuation process for incapacitated dependents who are age 26 and losing coverage. **Completed requests must be received by the plan prior to January 1, 2015.**

Members enrolled in:

- Key Advantage, TLC HDHP or a plan that coordinates with Medicare must contact Anthem at 1-800-552-2682.
- Kaiser Permanente must contact the plan at 1-800-777-7902.

Group Benefits Administrators are responsible for immediately notifying employees or retiree group enrollees whose children will lose eligibility on January 1. Attached are sample letters that you may use to notify affected participants. In the retiree group, letters should be sent to the original participant.

A report showing the affected employees/retirees and dependents is available by logging into your group's HuRMan File Repository. Your group's designated user previously received their user name and password necessary to access the HuRMan folder. If you have a problem logging into the HuRMan File Repository, please contact Support@dhrm.virginia.gov. Questions about a particular report found within your HuRMan folder and requests for an additional user should be directed to OHB@dhrm.virginia.gov.

Following is a reminder of how to access your HuRMan folder:

Your designated user should follow these steps to access your group's HuRMan folder:

- 1. Go to the Commonwealth's Department of Human Resource (DHRM) website (www.dhrm.virginia.gov) and select the 'Information Technology' link.
- 2. Select the 'Agency Web Portal Login' link.
- 3. Login using your HuRMan user name and password.
- 4. Under the 'Select an Application' dropdown menu choose 'Agency Repository'.
- 5. Then, select the report **BES-Dependent-Age-26-Approaching-Termination-Rpt-04N-NNN-08032014.txt** (For 04N-NNN enter your group number)

There will be a text version of the report whether or not your group has a dependent to be purged.

In addition, for groups with affected dependents, BES-Dependent-Age-26-

Approaching-Termination-04N-NNN-08032014.csv is a file that will open directly into Microsoft Excel for anyone wanting a spreadsheet. Please note that because the report was run on August 3, 2014, it does not include participants who were entered into the system after that date. You must identify and notify anyone entered after that date. If timely application for continued coverage for an incapacitated dependent child is made and the approval is not received by December 31, 2014, the child will be removed from coverage. Upon approval for continuous coverage, the incapacitated dependent may be reinstated retroactively to January 1, 2015.