



**COMMONWEALTH OF VIRGINIA
DEPARTMENT OF HUMAN RESOURCE MANAGEMENT**

Group Administrator Memo #17-06

To: TLC Group Benefits Administrators
From: State and Local Health Benefits Programs
Date: September 21, 2017
Re: Dependents Who Lose Eligibility at the End of 2017

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, 2018, and the employee's or retiree group participant's membership will be reduced appropriately. **Although we do not need a new Enrollment Form for this reduction, you may want 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 resides full time with the employee, retiree or other natural or adoptive parent,
- the dependent is not married,
- the dependent receives more than one-half of his or her support from the employee/retiree,
- the dependent remains continuously covered on a parent's employer group coverage, 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 that are age 26 and losing coverage. **Completed requests must be received by the plan prior to January 1, 2018.**

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 Kaiser 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 users previously received the user names and passwords necessary to access the HuRMan folder. If you have a problem logging into the HuRMan File Repository, please contact IHelp@dhrm.virginia.gov . Questions about a particular report found within your HuRMan folder and requests for an additional user should be directed to TLC@dhrm.virginia.gov .

Please note that because the report was run in August 2017, 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, 2017, the child will be removed from coverage. Upon approval for continuous coverage, the incapacitated dependent may be reinstated retroactively to January 1, 2018.