



# **The Local Choice 2017 RoadShow**

**March 7, 2017  
through  
March 23, 2017**

# AGENDA

- Welcome
- Renewal Basics
- Legislation/Mandates
- CommonHealth
- Systems Components
- Anthem Medical/MHSA
- Delta Dental
- Housekeeping
- Adjourn

# Renewal Process

- On-line Group Data Sheet must be accessed and submitted via secure portal.
- You Must Complete All Sections of Group Data Sheet
- Deadline for submission is April 1, 2017.
- Will Be Processed in Order Received.
- You will receive confirmation (fact sheet) once approved.
- Late Forms Will Cause Delay in Set-up, ID Cards and Result in Claim Denials
- Extensions Are Only to Return Forms Not to Renew/Terminate.

# Employer Data Sheet

- You should know if Stand Alone or Combined Group
- Must have a Subdivision for each FEIN. Subdivisions with same FEIN are permitted and may have different contacts, but must have same rules, plan selections and cost-sharing
- Subdivisions with different FEIN may have different contacts, different rules and different cost-sharing, but must offer same plans
- Groups with 10-month rates must have separate subdivision
- To add or remove a subdivision, contact Brenda Farrish at [Brenda.Farrish@dhrm.virginia.gov](mailto:Brenda.Farrish@dhrm.virginia.gov)

# Open Enrollment (OE) Dates

- IRS requires that Open Enrollment dates submitted on Renewal Data Sheet must be honored.
- Not a complete Re-enrollment.
- Signature dates and form received dates must be within OE window.
- Changes outside OE require consistent Qualifying Mid-Year Event or will be denied.

# ID Cards

- Not issued until 3 weeks prior to effective date.
- Sent to participant's address on file with DHRM.
- If incorrect or illegible, there will be delays.
- Always confirm address on HuRMan Enrollment report before requesting duplicates.
- Duplicate cards available by calling Customer Service (800) 552-2682 or ID Card Hotline at (866) 587-6713.
- After effective date, electronic copy available for use until hard copy received.

# IRS Form 1094 and 1095

- 1095s completed and sent for all groups with TLC for entire Calendar 2016 (unless you opted out).
- 1094s due before end of March and will be completed and filed
- Duplicate forms are available immediately.
- No corrections for personal data errors

# **ACA Section 1557 Nondiscrimination in Health Programs and Activities Rule**

- The Section 1557 Rule offers clarifications relating to Gender Identity, Notifications and Language Assistance
- This is law and TLC will comply.



# COVA Local

## SB 364

- Rates distributed February 22, 2017
- Round 2 underway. Non-binding decisions due March 15, 2017. Consider carefully. Decision is important to final rate process.
- Final rates to be published fall 2017.
- Final rates based on experience and demographics of those committing in Round 2.
- Binding decision due at end of 2017.
- COVA Local to go live July 1, 2018



## Employee Wellness Program



*All employees participating in TLC Health Benefits Program are eligible.*

# Relax

**We are  
here to  
help!**





- **FREE Health Check Screening every 2 years**

- Total and HDL Cholesterol
- Blood Pressure
- Height/Weight and Body Mass Index
- Diabetes Risk Assessment
- Non-fasting and immediate results
- For participating employees and their adult dependents
- ~ *Contact your Regional Coordinator to schedule; vendor requires 30 day lead time.*

# Health Education Campaigns



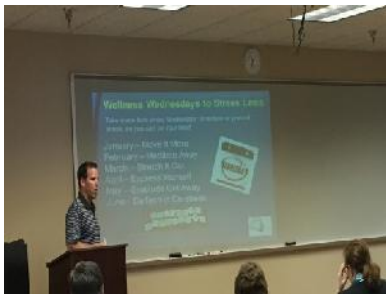
- ***Focus On Fiber*** – Amazing things happen to our bodies when we eat enough fiber. Let's sort myth from fact and explore the many health perks of fiber.
- ***Think About It*** – Keeping your brain healthy involves living intentionally. We have broken it down into easy steps: learn more, get moving, stay connected, eat right, and take charge.



# Program Options to Meet Your Needs

- **Traditional Presentation** – can be *15 - 45 minutes*
- **Learning Station** – best suited for a high traffic area (benefits fair or in-service day)
- **Coupon** - *paper or electronic*
- **Video** – *web link*

***Contact Your Regional Coordinator to schedule***



# Quit For Life<sup>®</sup> Program

- FREE tobacco cessation program for health plan participants 18 and older
- Individualized program includes a personal Quit Coach
- May include free nicotine replacement or covered medications
- The support you need when you're ready
- Enroll online or by phone at 1-866-784-8454



# Future Moms

## Healthy pregnancies reduce risk of premature birth

- Unlimited access to experienced nurses
- Excellent information on pregnancy and childcare
- Support and guidance in areas like breastfeeding
- Enroll in the first trimester and the hospital co-pay for delivery is waived (~ \$300 value)
- CALL 1-800-828-5891





# CommonHealth Compass

- Newsletter published periodically
  - Program Highlights
  - Success Stories
  - Information & support materials
  - Recipes
  - Go green, save time and reduce program expenses – ask your coordinator for the **electronic version**

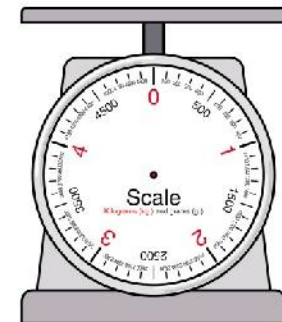


# Focus on Fiber

Losing weight, eating well, and  
improving your health by  
increasing your dietary fiber.

# How much fiber?

- *The average adult gets 15 grams a day*
- **Women need 25 grams per day**
- **Men need 38 grams per day**
- *Rule of thumb for kids = their age + 5 grams of fiber*





# Which foods have the most?



<b>Lentils</b>	15.6 g	1 cup
<b>Black Beans</b>	15.0 g	1 cup
<b>Peas</b>	8.8 g	1 cup
<b>Raspberries</b>	8.0 g	1 cup
<b>Whole Wheat Spaghetti</b>	6.3 g	1 cup
<b>Peanuts</b>	6.0 g	1/2 cup
<b>Pear</b>	5.5 g	1 medium
<b>Bran Flakes</b>	5.3 g	3/4 cup



# Ten things that may happen:

1. Lose weight.
2. Maintain a healthier weight over time.
3. Cut your Type 2 Diabetes risk.
4. Lower your odds of heart disease.
5. Reduce your risk of certain cancers.
6. Have healthier bones.
7. Live longer.
8. Get an all natural detox.
9. Have healthier gut bacteria.
10. Be more regular.



When looking at packaged foods

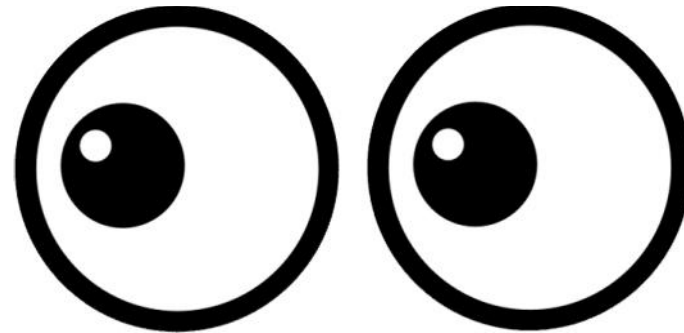
5% is

20%



<b>Nutrition Facts</b>	
8 servings per container	
<b>Serving size</b>	<b>2/3 cup (55g)</b>
<b>Amount per serving</b>	
<b>Calories</b>	<b>230</b>
<b>% Daily Value*</b>	
<b>Total Fat</b> 8g	<b>10%</b>
Saturated Fat 1g	<b>5%</b>
Trans Fat 0g	
<b>Cholesterol</b> 0mg	<b>0%</b>
<b>Sodium</b> 160mg	<b>7%</b>
<b>Total Carbohydrate</b> 37g	<b>13%</b>
Dietary Fiber 4g	<b>14%</b>
Total Sugars 12g	
Includes 10g Added Sugars	<b>20%</b>
<b>Protein</b> 3g	
Vitamin D 2mcg	10%
Calcium 260mg	20%
Iron 8mg	45%
Potassium 235mg	6%

\* The % Daily Value (DV) tells you how much a nutrient in a serving of food contributes to a daily diet. 2,000 calories a day is used for general nutrition advice.



**Find  
It  
By  
Eating  
Real food**



"Care for some freshly-ground fiber on your cheese fries?"

- Science doesn't quite replicate Mother Nature yet.
- Talk with your doctor about supplements.



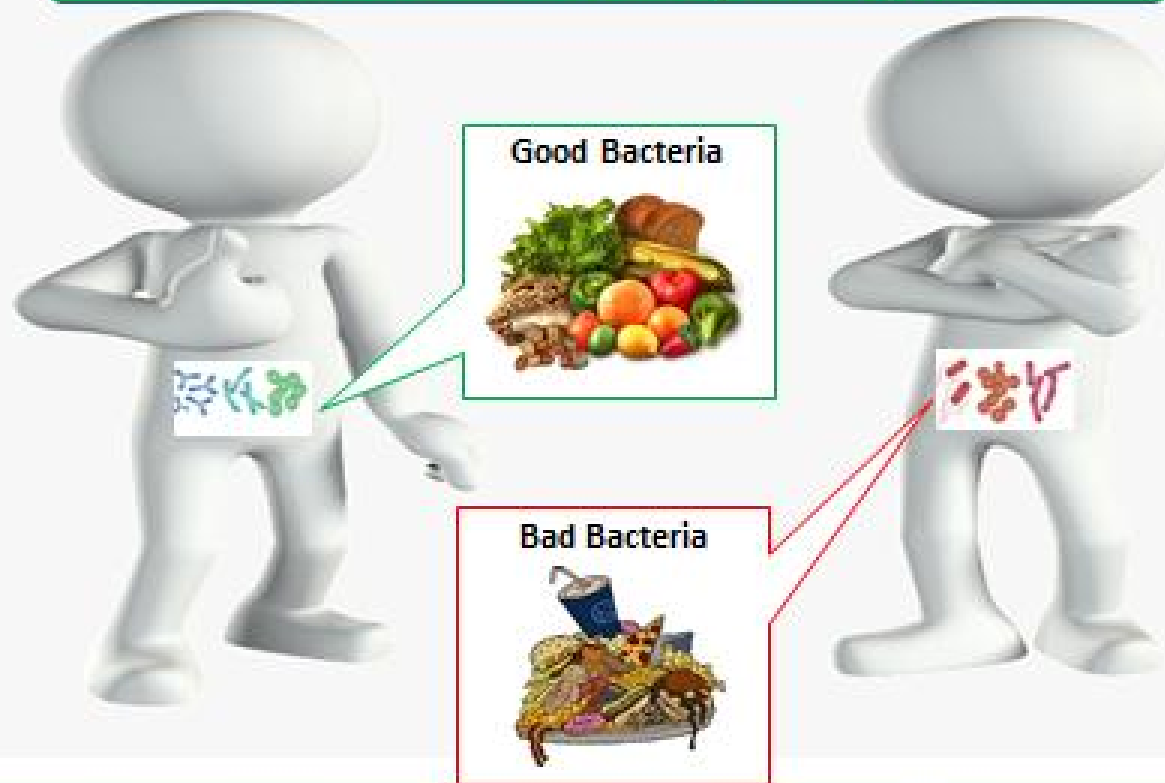


# Swap meet

- Raspberries > Raisins
- Whole wheat pasta > White pasta
- Chia seeds > Granola
- Beans > Chicken
- Quinoa > Brown Rice > White Rice



## The Bacteria Inside Our Digestive System



The average human intestine contains about 5 pounds of bacteria. They help you break down food to use the nutrients while keeping harmful bacteria in check. Eating low fiber foods upsets the balance and causes inflammation which can lead to constipation and indigestion. Eating vegetables and whole grains keeps the good bacteria happy and your gut healthy.

# Still hungry for more?



- [www.commonhealth.virginia.gov/tlc](http://www.commonhealth.virginia.gov/tlc)
- [www.facebook.com/commonhealthva](http://www.facebook.com/commonhealthva)



# Regional Coordinators

**Suzanne Meador** – [suzanne.meador@dhrm.virginia.gov](mailto:suzanne.meador@dhrm.virginia.gov) - Lee, Scott, Wise, Dickenson, Buchanan, Russell, Washington, Tazewell, Smyth, Grayson, Carroll, Wythe, and Bland counties.

**Kristina Fischbach** – [kristina.fischbach@dhrm.virginia.gov](mailto:kristina.fischbach@dhrm.virginia.gov) – Augusta, Clarke, Frederick, Greene, Madison, Page, Rappahannock, Rockingham, Shenandoah and Warren

**Susan Perry** - [susan.perry@dhrm.virginia.gov](mailto:susan.perry@dhrm.virginia.gov) – Bedford, Botetourt, Craig, Floyd, Franklin, Giles, Henry, Montgomery, Patrick, Pittsylvania, Pulaski, Roanoke

**Justin Byrd** – [justin.byrd@dhrm.virginia.gov](mailto:justin.byrd@dhrm.virginia.gov) – Albemarle, Alleghany, Amherst, Appomattox, Bath, Buckingham, Campbell, Cumberland, Fluvanna, Goochland, Highland, Louisa, Nelson, Rockbridge counties and the cities of Charlottesville & Lynchburg

# Regional Coordinators

**Cynthia Duncan** - [cynthia.duncan@dhrm.virginia.gov](mailto:cynthia.duncan@dhrm.virginia.gov) – Accomack, Isle of Wight, Northampton and Southampton counties and the cities of Chesapeake, Norfolk, Portsmouth, Suffolk and Virginia Beach

**Mary Louise Gerdes** – [marylouise.gerdes@dhrm.virginia.gov](mailto:marylouise.gerdes@dhrm.virginia.gov) – Caroline, Charles City, Essex, Westmoreland, Northumberland, Richmond, Lancaster, Middlesex, Mathews, King and Queen, King William, New Kent, Gloucester, York, James City, Surry and Sussex counties and the cities of Hampton, Newport News, Poquoson and Williamsburg

**Craig Hicken** – [craig.hicken@dhrm.virginia.gov](mailto:craig.hicken@dhrm.virginia.gov) – Amelia, Brunswick, Chesterfield, Charlotte, Dinwiddie, Greensville, Halifax, Lunenburg, Mecklenburg, Prince Edward, Nottoway, Chesterfield and Dinwiddie counties and the cities of Colonial Heights, Emporia, Hopewell and Petersburg

# Regional Coordinators

**Amy Moore** - [amy.moore@dhrm.virginia.gov](mailto:amy.moore@dhrm.virginia.gov) – Culpeper, Fairfax, Fauquier, Loudoun, Madison, Orange, Prince William, and Stafford counties and the cities of Manassas, Manassas Park, Fairfax and Falls Church

**Rose O’Toole** – [rose.otoole@dhrm.virginia.gov](mailto:rose.otoole@dhrm.virginia.gov) – Cumberland, Henrico, Hanover, King George, Louisa, Powhatan, Spotsylvania, Fredericksburg and the city of Richmond



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CommonHealth

1986 CommonHealth 30 Years of Working Well

CommonHealth  
@CommonHealthVA

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This Week

See All

Government Organization in Richmond, Virginia  
4.6

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100% response rate, 1 hour response time  
Respond faster to turn on the badge

947 likes +4 this week  
Jessica Paronek and 25 other friends

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[www.facebook.com/commonhealthva](http://www.facebook.com/commonhealthva)



# Questions?

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Dept. of Human Resource Management  
101 N. 14<sup>th</sup> Street, 12 floor  
Richmond, VA 23219

[Anne.Dinterman@dhrm.virginia.gov](mailto:Anne.Dinterman@dhrm.virginia.gov)



# BES

- Official Eligibility DataBase maintained by DHRM for State and TLC
- If Not in BES - It Is Not Valid
- Updated by Forms you Send to TLC
- Provides Files to Vendors
- Creates Reports for Groups

# Process

- Group Submits Forms to TLC/DHRM
  - Preferably by Fax for PHI Data Security
  - Forms received on/before the 6<sup>th</sup> of the month normally appear on the bill created on the 10<sup>th</sup>
- DHRM Enters Data in BES
  - Creates Files for Vendors
  - Creates Reports for Groups
- Vendors Update their Files Based On our Data Usually Within 3 Days
- Vendors Issue ID Cards Based on our Records
- Replacement ID Cards Are Requested from Vendor

# Forms

- Must Comply with TLC Plan Rules and Your Pre-Tax Documents
- All Forms must be Complete, Accurate, Legible, and Certified by Employer/BA with an Effective Date
- You Keep Originals and Supporting Documentation to Support Audit
- TLC Needs Documentation to Approve Adoption/Custody, Court Orders, Other Children, Incapacitated Adult Dependents

# Group Numbers

- DHRM group number is a three-part number
  - Agency code (3 digits, either 047 or 048)
  - Group code (3 digits)
  - Sub-division code (2 digits)
- DHRM's group number for forms and Anthem's group number for billing are similar, but there are differences.
- Must use correct DHRM group numbers on all forms to avoid keying errors and delays

# Group Data Change Form

- Used to Change:
  - Group Mailing and Shipping Address
  - Contacts – total of 4 per subdivision
    - Benefits & Billing Administrators
    - Benefits & Billing Executives
    - May take up to 3 weeks (after receipt) for a new contact to be granted access to HuRMan reports and get on E-News mailing list.
- Also part of Renewal Data Sheet
  - Controls who gets:
    - Day to day Communications
    - Renewals
    - Billing
    - Contracts

# Enrollment Form

- READ the Instruction Sheet but Do Not Return It to DHRM. It Contains Special Instructions on:
  - Deadlines, effective dates and Term Dates
  - Initial Enrollment of EE, REE, Medicare REE, Survivors or COBRA/Extended Coverage
  - Spouses of EEs who are also EEs
  - Split Contracts for REEs
  - Transfer of REE, Survivors and COBRA

# Enrollment Form

- Used for:
  - Initial Enrollment
  - Change Enrollment
    - Timing of Forms Is Important
  - Waive Coverage
- Complete All Sections – Even for Waivers
- Both Participant and BA Must Sign

# Waivers

- All eligible employees who decline to enroll need to complete a waiver for ACA reporting.
- Waiver forms need to be complete, including name, address, date of birth and SS#.
- We create a record in BES.
- Once an employee who waived, terminates employment, please send us a Group Adjustment form to terminate their record in BES.



# Personal Data Change Form

- Used to Change or Correct Employee or Dependent Personal Data
  - Participant Signature not Required on this Form
  - However, BA Must Certify

# Group Adjustment Form

- Used to Terminate a Participant's Entire Record from the DataBase
- Cancels All Coverage for Participant and any Covered Dependents
- Participants Include:
  - Employees
  - Retirees
  - Survivors
  - COBRA Qualified Beneficiaries
- Do Not Use to Remove Dependents

# Terminations

- Must be submitted timely
- Retro terms could cost you \$\$\$\$\$\$
  - Only 59-day Retroactivity
  - EE and ER have liability for Pharmacy claims
- Coverage ends last day of month after lost of eligibility even if premium is paid month in advance, group can refund premium
- Ex-spouses may not remain on plan even if divorce decree says employee is responsible (COBRA is option)
- Use Group Adjustment Form to terminate.

# Administrative Process Questions and Answers

- Wide Variety of Frequently Asked Questions and Answers
- Updated Regularly
- Maintained Under Policies and Procedures on TLC Web Site

# HuRMan

- Nickname for Secure Server
- Group Reports posted here
- All 4 Contacts get access
- Access for new contact may take up to 3 weeks after we receive updated Group Data Change form
- Must have ID # or SS#.

# Reports

- Regularly Posted to Your HuRMan Folder
- Contain Very Valuable Information on Your Group's Data
- Important for IRS Form Completion and Routine Plan Management
- All four (4) contacts have access to reports

# Reports

- **BES Turnaround and Turnaround Summary**
  - Created Every Time a Transaction Is Processed
  - Posted Daily
  - Your First Chance to Find Data Entry Errors
  - If Not Daily, Review as Frequently as you Can

# Reports

- **BES Enrollment Report**

- Two Part Report: Participants and Dependents
- Created Weekly on 3<sup>rd</sup>, 10<sup>th</sup>, 17<sup>th</sup> and 24<sup>th</sup>
- 1st Three Reports Show BES Membership in Effect on 1<sup>st</sup> of that Month
- Last Report shows Membership as of 1<sup>st</sup> of Next Month
- You Should Review at Least Monthly and Report Errors Immediately



# Reports

- **BES Exception Report**
  - Created on 3rd of Each Month
  - Reports Database Discrepancies that Require Group Attention
  - Cumulative and Remains on Report Until Resolved
  - Examples Include:
    - Invalid SS#
    - Invalid Address

# Reports

- **Termination Report**
  - Monthly report of participants and family members recently terminated
  - Can be used to assist in issuing COBRA Notifications
- **BES/ACA Reconciliation Report**
  - Created in October, December and January
  - Reports Your Calendar Year Records in BES
  - Data Used for ACA Employer Reporting

# Other Reports

- **Persons Eligible for Medicare** – Monthly report identifying participants (and spouses) approaching Age 65. Note: This report looks 3 months ahead of the individual's DOB, for example, a person turning age 65 in April will appear only on the January report. Does not include Medicare Disability.
- **Dependents Approaching Age 26 Termination**
- **Age 26 Termination Report**

# Transforming the digital experience

Make it easy. Make it simple. Make it meaningful.



# Quick, clear and consumer-centric

That's what members expect from us now. And that's what we're delivering.



**ANTHEM ANYWHERE**  
Mobile app



**ANTHEM.COM**  
Public and secure web



**COST, QUALITY & DOCTOR CHOICE**  
Transparency solutions





# Anthem Anywhere

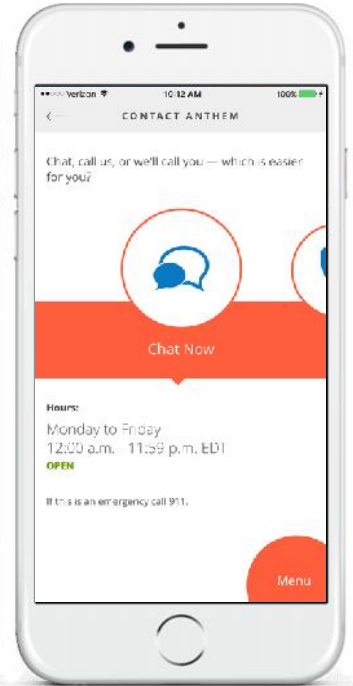
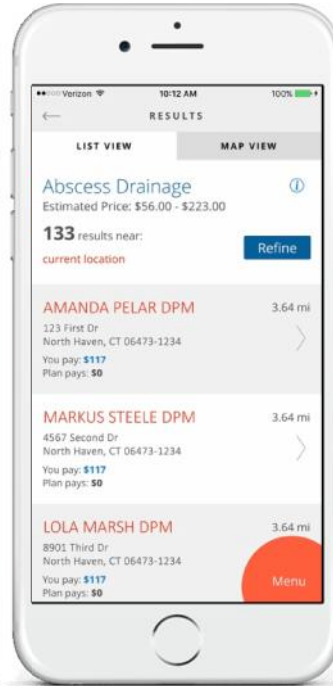
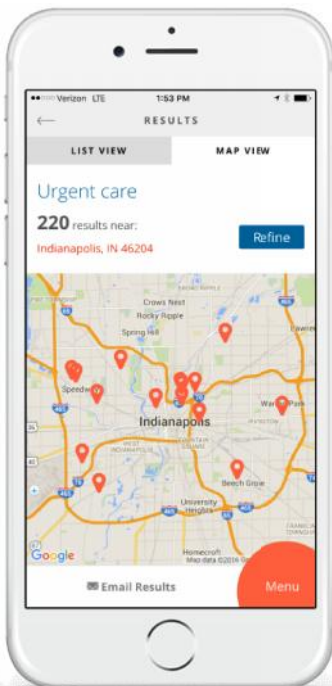
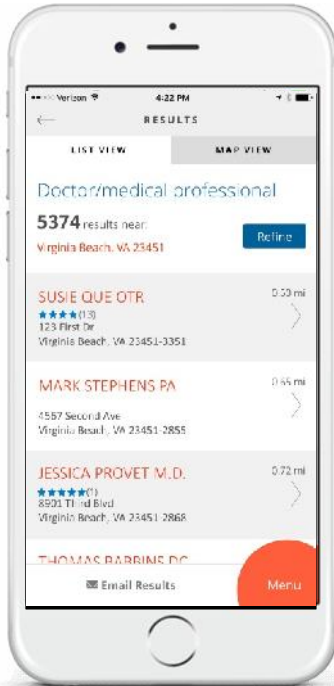
Mobile design is different...

It's **personal** and intimate...

Consumers feel a unique, **emotional** bond to their mobile device...

Consumers want to stay **connected**

**Our goal was simple – reimagine our mobile app to improve usability and enhance the user experience and visual design.**



# LiveHealth Online



Provider's care at the speed of life.

LiveHealth Online is the trade name of Health Management Corporation, a separate company providing telehealth services on behalf of Empire Blue Cross and Blue Shield.



# Visit with a doctor online, anytime. From work, at home or on the go.

BlueCr

Anthem.  
BlueCross BlueShield

## LiveHealth Online:

- Is available in most states, including D.C.\*
- Is available 24 hours a day, 7 days a week, 365 days a year
- Is available anywhere you have a computer or mobile device with Internet access (at home, in the office or on the go)
- Provides access to in-network, board-certified doctors and licensed behavioral health professionals
- Allows doctors to ePrescribe utilizing local pharmacies
- Takes member payments via Visa, MasterCard, American Express and Discover
- Is secure, convenient and easy to use

\*LHO is available in 48 states and DC as of 08/15/2016, for state telehealth availability, check the map on [LiveHealth.com](http://LiveHealth.com).

Easier and less expensive than urgent care

The mobile LiveHealth Online app is available on both iOS and Android devices.

LiveHealth Online mobile solutions

iOS

ANDROID



5  
8

LiveHealth Online is the trade name of Health Management Corporation, a separate company providing telehealth services on behalf of Empire Blue Cross and Blue Shield.



Say "Ahhhh."

90%

**patient  
satisfaction**

"I am very impressed and will continue to recommend this service to friends, family and co-workers."

85%

**completely resolve  
their medical issue**

"I was able to get things taken care of in less than 10 minutes."

90%

**saved  
time**

"I will definitely use it again. I saved at least three hours by not going in to the doctor—and a ton of cash!"

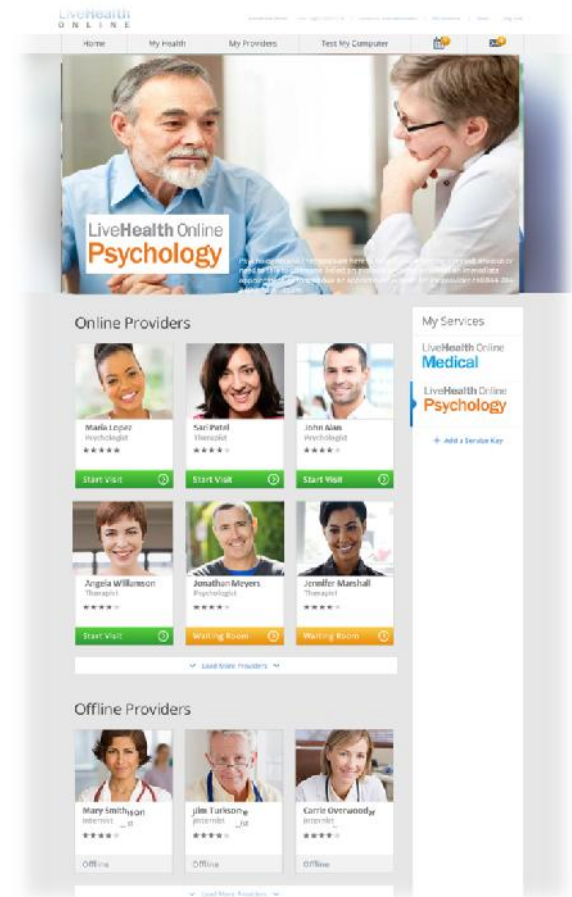


**Introducing online visits**  
**With psychologists and therapists**  
**Behavioral health specialists at your fingertips**



## Seeking help for behavioral health is a big step. That's why we've made it easy and convenient.

- Evening and weekend access based on availability<sup>1</sup>
- Ability to schedule the first visit and be seen within four days and, in some cases, on demand
- Ability to interact privately with a psychologist or therapist from a comfortable environment like their home
- Your cost share remains the same as for current in-office therapy benefits



1. Appointments can be scheduled from 7am to 11pm coast to coast; Psychology is for those 10 years and older and is available in all 50 states.



**Online therapy visits can give members support for common issues such as:**

- Stress
- Feeling anxious
- Depressed mood
- Relationship or parenting issues
- Grief
- Panic attacks
- Coping with an illness



“I **LOVE** LiveHealth Online Psychology. It is a life-changer. As a mobility-impaired person, it is an absolute gift to be able to see a mental health professional from the comfort and safety of my own home.”



**88%**

Of users feel they were able to **make an appointment sooner** than compared to the office

Outstanding ratings from our users with LiveHealth Online receiving **4.8 out of 5** overall and ratings of **4.9 out of 5** for the providers they used.

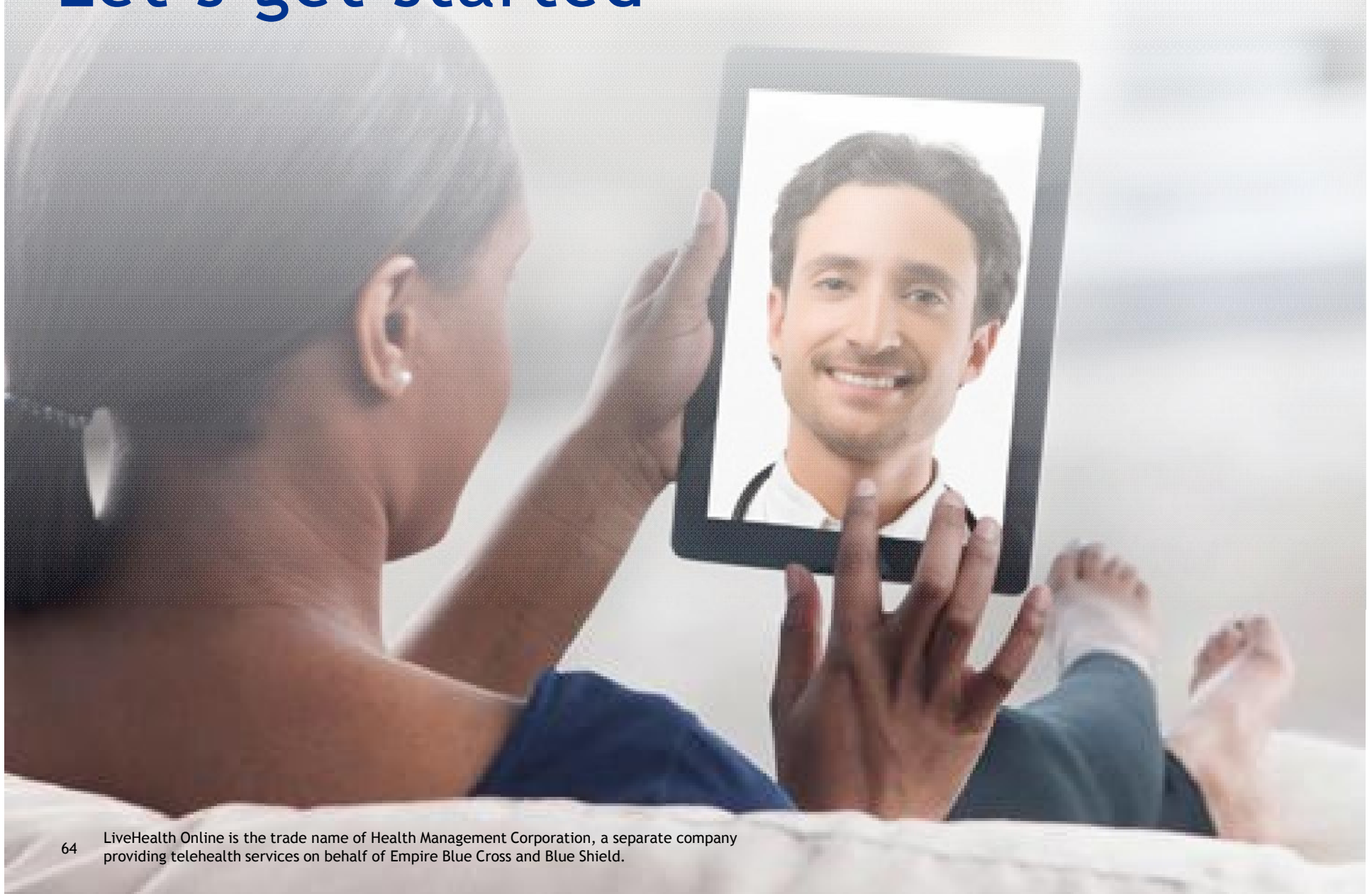
“Allows me to meet with a therapist at times when I normally would not be able to schedule a session. It is very easy to schedule an appointment.”

**96%**

Of users say their providers were professional and helpful



# Let's get started





## **NOW: LiveHealth Online makes EAP access easy also!**

- **Online short-term EAP counseling sessions to help members address problems related to work/life balance such as parenting, relationships and managing stress at home and work**
- **EAP counseling sessions are at no cost to the member utilizing a coupon code provided by the EAP**
- **Continuity of care allows for online sessions to continue with the same therapist using the behavioral health benefit through LiveHealth Online Psychology**
- **Ability to schedule the first visit and be seen in as little as four days**
- **Contact the EAP at 855-223-9277 to obtain information on how to access your EAP counseling visits using LiveHealth Online!**

# The Resources to Make a Difference

**Ease of access** – 24/7 call center; online EAP member center/provider finder

**Counseling services** – 4 face to face counseling sessions (office or LiveHealth Online) per incident per year for employees, covered dependents and household members.

**Child and Elder care resources**

**Legal/Financial services**

**Identity protection**

**Work/Life services**

**EAP website** – tools, information and resources [www.AnthemEAP.com](http://www.AnthemEAP.com) Log in: Commonwealth of Virginia, then choose The Local Choice

**Monthly Promotion/Webinar** – topical focus each month with webinar





**For crisis situations or consultation regarding a workplace trauma response** which may involve Critical Incident Response (**CIR**) to include having a counselor on site following a tragic event:

- **Call 855-223-9277 and press 1 for CRISIS**

**For Free On-Site Educational and/or Wellness workshops:**

- View the catalog on [www.AnthemEAP.com](http://www.AnthemEAP.com) under *Manager Tools* to choose your training topic(s)
- Contact Lynn Vogel [lynn.vogel@anthem.com](mailto:lynn.vogel@anthem.com) or 804-354-4197 to schedule

Modules available  
on depression,  
anxiety, substance  
abuse, and now,  
chronic pain

Inspirations

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# The Local Choice Road Show

March 2017



# Delta Dental PPO plus Premier



## *Dual-network advantage*

- Members can access the Delta Dental PPO network for maximum savings or the Delta Dental Premier network for maximum provider choice

In 2016:

- 90% of The Local Choice claims were paid to participating Delta Dental dentists

# 2017 TLC Dental Benefits

- Dental benefits will continue to be administered by Delta Dental
- Two plan options to choose from with selected Anthem medical plan: ***Preventive*** or ***Comprehensive***
- No changes to current plan designs



# 2017 TLC Dental Plan Options

Benefits	Preventive	Comprehensive
<b>Dental Plan Year Deductible</b>	No contract year deductible	\$25 Individual \$75 Family
<b>Plan Year Maximum</b>	No contract year maximum	\$1,500
<b>Preventive Dental Care</b> (routine oral exam and cleaning - twice per contract year, x-rays, sealants and fluoride for children)	100%	100%
<b>Primary Dental Care</b> (fillings, root canal, simple extractions, periodontic services, etc.)	Not Covered	80% coverage after deductible
<b>Major Dental Care</b> (crowns, inlays, onlays, dentures and fixed bridges)	Not Covered	50% coverage after deductible
<b>Orthodontic Services</b> (for children and adults)	Not Covered	50% coverage, no deductible, with \$1,500 lifetime maximum



# Plan Design Benchmarks

Benefit	Large VA Employers	TLC Preventive	TLC Comprehensive
Annual Maximum	\$1,500	N/A	\$1,500
Individual Deductible	\$50 – 58% \$25 – 24%	\$0	\$25
Lifetime Orthodontic Maximum	\$1,500	N/A	\$1,500
Adult Orthodontic Coverage	25%	N/A	YES
Posterior Composites	84%	N/A	YES
Additional Fluoride for Children	70%	YES	YES
Occlusal Guards	28%	N/A	YES
Preventive services do not count towards annual maximum	69%	YES	YES
Implants	71%	N/A	YES

# Benchmarking Utilization

Benefit	Industry (2015)	TLC Government	TLC Schools
Diagnostic & Preventive	47%	50%	51%
Basic Restorative	13%	16%	15%
Endodontics	6%	6%	6%
Periodontics	4%	3%	3%
Oral Surgery	6%	4%	5%
Prosthodontics	2%	2%	2%
Major Restorative	11%	10%	9%
Orthodontics	6%	5%	5%
Miscellaneous	2%	2%	2%
Implants	3%	2%	2%

# Networks – High Growth, Low Turnover

- Delta Dental’s networks continue to be stable experiencing continued growth and low turnover

	Turnover	Growth
Delta Dental Premier	0.6%	3.2%
Dental PPO	1.5%	8%

Delta Dental’s network is 20% larger than any other dental carrier

# Networks – Quality of Care

- Delta Dental has dentists on staff to review complex treatment and consult with treating dentists to ensure appropriateness and quality of care
- Comprehensive grievance process
  - Easy to access for enrollees
  - We act as enrollee’s advocate
- All network dentists credentialed according to NCQA standards
- Nationally recognized Fraud Investigative Unit



# Superior Customer Service



- Delta Dental agrees to rigorous Performance Guarantees to ensure best possible plan administration and customer experience.
- Our satisfaction survey results consistently show customer satisfaction rates in excess of 90%. In 2016 customer satisfaction was over 92%.
- The average call wait time for TLC members is 8 seconds.
- Abandoned call rate of 0.28%.

# Website Capabilities for Members

Members are able to:

- View a step-by-step video tutorial and web guide
- Check benefits and eligibility
- Find a dentist
- Check claims status
- Look up average charges for dental procedures
- Download forms
- Learn valuable oral health information

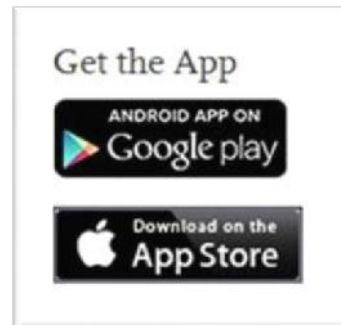
The screenshot displays the Delta Dental website interface. At the top left is the Delta Dental logo. The main banner features a smiling woman with a backpack and the text "Everyone Deserves A Healthy Smile". Below the banner is a "Find a Dentist" search box with a "Find" button and a "National Dentist Search" link. On the right side, there are five navigation buttons: "Subscribers", "Providers", "Group Administrators", and "Brokers", each with a play button icon. At the bottom, there are three sections: "Delta Dental Offers Individual Insurance!" with a list of links, "Oral Health & Wellness" with a list of links, and "Commonwealth of Virginia Plans" with a list of links. A large grey arrow points from the "Oral Health & Wellness" section to the "Commonwealth of Virginia Plans" section. On the far right, there is a small "grin!" logo.

<http://www.deltadentalva.com/commonwealthofvirginia.aspx>

# Mobile App

Delta Dental's Mobile App allows members to get the dental information that they need when they are on the go.

Members can find a dentist, check their coverage and review their claims information.



# Oral Health of TLC Members

Oral Health Category	TLC Government	TLC Schools
Healthy	32%	37%
Moderate	15%	16%
Serious	10%	11%
No Visits	43%	36%

- **33% of children 19 and younger with Government groups, and 27% of children with School groups did not see the dentist last year**
- **More than 20% of TLC members have not been to the dentist in two years.**
  - **Members that don't see a dentist incur over \$300 more in dental costs the following year**



# Pre-tax Documents

- IRS Requires Compliance with Your Section 125 Rules
- TLC Uses COVA Rules Unless You Tell Us that Your Rules Are Different
- **On 2017-18 Renewal Group Data Sheet select “Yes” if you have any rules different than TLC**
- **Select “No” if your rules are the same as TLC**
- Example 1: COVA Uses 60 Day Window for QMEs. Unless Updated Recently, Your Rules Probably Allow 30 Days. IRS Penalties Can be Severe.
- Example 2: Can't Allow Termination for Joining Marketplace Plan Unless Your Document Permits

# **QME: Gained Eligibility under Medicare or Medicaid**

- These qualifying mid-year event election changes are permitted when you, your spouse, or your child enrolls in Medicare or Medicaid (including FAMIS Plus). These changes are voluntary.
- Retiree group participants or covered family members of retirees who are eligible for Medicare must terminate coverage or enroll in a Medicare-coordinating plan unless they are still in their coordination period for End Stage Renal Disease.

## **Health Insurance Coverage Changes:**

- You may waive your coverage when you become eligible for Medicare or Medicaid.
- You may remove family members enrolling in Medicare or Medicaid, and
- You may change your plan when removing the named individual(s) enrolling in Medicare or Medicaid.
- HMO members must select a primary care physician.

## **Not a QME: Decide not to renew with Marketplace coverage**

- Cancelling coverage through the Marketplace is **not a QME to come on your TLC plan**. The Marketplace is not a government plan nor is it a group plan.
- However, at your Open Enrollment they can come on your plan.

# **Benefit Focus Anthem Employer Portal Is Not Available for TLC**

- All Changes, Additions, Terminations, Corrections –must be made through DHRM/TLC/BES
- Uploads overnight based on our entries
- Changes made at Anthem are lost with next upload

# Changes

- We encourage eMails to Explain Requests or make notes on forms BUT Forms Are Required to Make Changes
- Notifying Anthem does not make the change. You must notify DHRM/TLC
- Send Forms by One Method Only – **Do Not** Fax or eMail a Form and Follow up with a Hard Copy
- If Submission is Revised or Correction, Mark It as “REVISED”
- Confirm Receipt by HuRMan Report

# Coverage Effective Dates

- Request to enroll must be received within 30 days of employment date or newly eligible.
- When request is received by deadline, coverage can become effective on first of month coinciding with or following date of employment if permitted by Personnel Policies and Practices. EE does not get to choose.
- Waiting periods of 60 days or less are allowed.
- Missed deadline requires waiting until Open Enrollment or another consistent QME.

# Effective Date for QMEs

- An enrollment change due to a Qualifying Mid-Year Event will be effective the first of the month following receipt of completed enrollment form. Form dates must confirm.
- Retroactive enrollment is only permitted for birth or adoption.

# Late Payments

- Premium Due on the First Working Day of Month Payable in Advance
- If Not Received within 10 Day Grace Period, Considered Late and Subject to 1% Penalty
- Code of VA does not allow for exceptions
- If Premium and Penalty Not Received by 20<sup>th</sup> of Month, Claims Will Not Be Paid and Community Notified
- ER May Be Obligated to Pay Greater of Past Due Contributions or Incurred Claims Plus Penalty and Damages



# TLC Monthly Billing Process

Late Payment will have consequences. Timely payment of premium is key to maintain access to benefits. The Code of Virginia leaves little leeway in its application.

ACTION	SCHEDULE	COMMENTS
<b>Premium Due</b>	1 <sup>st</sup> working day of each month* payable in advance	<b>10 day grace period. 12% per annum interest penalty</b> applied if payment not received within grace period.
<b>Delinquency Notice Sent</b>	Sent to employer after 10 day grace period	Past due premium AND interest penalties are due by 20 <sup>th</sup> of month*.
<b>Claims Payment Suspended</b>	Past Due beyond 20 <sup>th</sup> of month	<b>Claims Payment suspended and the Department of Human Resource Management (DHRM) will place a notice of nonpayment in newspaper to notify covered employees of the delinquency and restriction on paying claims.</b>

\*Be sure to allow time for delivery (even if you are using overnight delivery service). Allow 2-3 days for the bank to process the check and credit your account. You may want to consider electronic payment but up to 2 days required for posting.

# Direct Bill

## Groups with Direct Bill for Early Retirees and/or Medicare Eligible Retirees and/or COBRA Participants

- Our Election Form and Enrollment Form are needed to enroll in COBRA.
- Direct bill members receive their monthly premium billing statements directly from Anthem around the 10<sup>th</sup> of the month, in advance. There is **a 45 day grace period** before **medical** coverage is cancelled for non-payment. Generally, not re-instated.
- **Important: There is no grace period for prescription drug coverage.** If premium is not paid to date, prescription drug coverage will be suspended regardless of whether the member is in the medical coverage grace period. When premium is received, within grace period, coverage will be reinstated. Paper claims are required and discounts may be lost.
- Direct bill members may sign up for **automatic bank draft**. Completed forms must be sent to the address on the form. Premiums will be drafted from the member's checking account on the 5<sup>th</sup> of each month. **It is BA's responsibility to notify members of the direct bill process.** A sample letter and bank draft information are found on the TLC website under Forms ([www.thelocalchoice.virginia.gov](http://www.thelocalchoice.virginia.gov)).
- Direct bill is not available for use with TPA services.
- Must mark on Data Sheet. Mid-year changes are discouraged and require reprogramming. It can take up to 3 months.

# Group Bill

## Groups with Group Bill for Early Retirees and/or Medicare Eligible Retirees and/or COBRA Participants

- Group bill segregates COBRA and/or Retirees on your regular bill. Member premium is due at the same time your active bill is due. If you haven't received payment when you pay your active bill, you should terminate coverage. They may be reinstated later if retiree payment is received before the 20<sup>th</sup> of the month or for COBRA participants within the grace periods. You no longer have liability for unauthorized Rx expenditures. Members will have to file paper claims for reimbursement.
- If you use a TPA, you must use this contract. We will not bill your TPA but you may send the invoice to them. We will accept payment from TPA if requested.
- Our Election Form and Enrollment Form are required to enroll in COBRA.
- COBRA grace periods are not extended with a TPA agreement. Strict 60-day election period and 45-day payment time frames will apply, as well as 30-day periodic payment grace period.

# Retiree Plan Eligibility

## Retiree Not Eligible for Medicare

- KA
- HDHP
- Kaiser

## Retiree Eligible for Medicare or with Dependent Eligible for Medicare

- A65 or A65 w/DV or Medicare Complementary
- Medicare eligible Retirees and Medicare eligible dependents of Retirees can't remain in KA, HDHP or Kaiser plans.

# Importance of Medicare Supplement

- Retirees Found in Wrong Contract Will Be Retroactively Moved to Correct Contract or Termed
- Medical/MHSA/Dental Claims Will Be Retracted
- Drug Charges Will Be Billed to Member or Group
- Medicare May Charge Late Fee and/or Deny Special Enrollment
- Medicare Supplements may not be available

# Extended Coverage / COBRA

- Effective 1-1-2017, ALL GROUPS must offer.
- Updated COBRA Election Notice is on the website with instructions.
- Updated General Notice must go to all eligible.
- We must have both Election Notice and Enrollment Form.
- You need to certify on Enrollment Form when COBRA ends
- At renewal, you will have option for Group Bill or Direct Bill for COBRA

# COBRA, continued

- Even with Direct Bill, it is up to you, the BA to notify us when a COBRA participant's coverage ends.
- If you choose to use a TPA for COBRA administration, please note that we can only accept enrollment elections and terminations from you **using our forms**. A TPA's forms cannot be used to enroll or term COBRA.

# COBRA, continued

- It is up to you to track when COBRA ends and send in the proper form (Group Adjustment Form). We do not have a way in BES to enter a future term date.
- If we find out a participant is on COBRA longer than they are eligible, we will term their coverage retro to the last day they are eligible, claims will be retracted and Rx claims paid will be the responsibility of the participant.



# Excluding Spouses or Spousal Surcharges

- Groups have inquired about excluding spouses that have access to other coverage. TLC can't track but groups may do so if they wish. If we receive a certified Enrollment Form to include them, we will.
- TLC can't bill a surcharge. We must bill exact coverage amount. If applied, you are responsible for legal documents and must collect surcharge. You must defend any discrimination charges.

# Questions??

## **The Local Choice**

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