



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

Group Administrator Memo #01-02

To: Group Benefits Administrators
From: Charles S. Reed, Associate Director
State and Local Health Benefits Programs
Date: March 8, 2001
Re: Long Term Care Program Available July 1, 2001

Long-term care insurance will be an available option for The Local Choice groups on July 1, 2001. No premium contribution from employers is required. However, you may contribute if you wish to reduce the cost to your employees. Only groups participating in The Local Choice Health Benefits Program will be allowed to participate in the Long Term Care Program.

Benefits in our contract are identical to those offered to employees of the Commonwealth of Virginia. Information kits are enclosed and contain complete details on the long-term care insurance plan including a general explanation of long-term care, rates, a summary of the plan design, a long-term care glossary and an employer commitment form. Aetna will attend our regional meetings in mid-March to answer your questions about long-term care. We hope to have this information on our web site in the near future.

We recognize that some of our member groups may already offer a long-term care product or for other reasons may not wish to participate with this optional product. Therefore, we are asking that each employer decide if they want to receive the information kits and have this product made available to their employees by completing the attached participation form and returning it to the Local Choice office. **Please complete the participation form even if you do not want to participate in the program.** If you choose to participate, then the information will be sent to the contact designated on your returned form.

Eligibility for Long-Term Care Insurance

A TLC group's full-time employees, their spouses, parents and parents-in-law, along with retirees, their spouses and surviving spouses are eligible for long-term care insurance. You may also choose to cover part time employees and their eligible dependents. **No other family members may complete an application.** Aetna is licensed to provide long-term care insurance to the specific, eligible family members listed. Actively at work employees, who enroll on or before November 30, 2001, will not have to provide proof of good health. Retirees and eligible family members must complete a medical questionnaire and must be approved by Aetna before coverage becomes effective.

Long-Term Care Insurance Effective Dates and Benefits

An individual employee, retiree or eligible family member's individual coverage will take effect at a time determined by Aetna after a completed application is received and processed. The effective date will be included on the certificate of coverage that the enrolled participant receives.

To receive benefits, the participant must be unable to substantially perform two of six activities of daily living, such as eating, dressing, and getting in and out of bed, or the participant must have a severe cognitive impairment.

The program pays for actual expenses up to a specified daily limit at a specific reimbursement level. Daily benefit options range from \$75 to \$200. Benefit levels will vary according to whether the services are performed at a nursing home, assisted living facility, hospice facility (all 100% of the daily benefit amount), at home or in adult day care (both 50%). There is a 90-day waiting period.

Additional Information

If you have questions or need further information, you may contact The Local Choice at (804) 786-6460 or you may review information on the Aetna web site at

<http://www.aetnaushc.com/custom/group/commonwealthva/>.

This web site information was originally designed for the Commonwealth of Virginia and will be revised to include The Local Choice. At this time the "How to Enroll" and "Eligibility" pages are not appropriate for The Local Choice. There will be TLC specific information posted in the near future. Eligibility must be defined by each TLC employer and should be consistent with medical plan eligibility.