## **COMMONWEALTH OF VIRGINIA**

## **DEPARTMENT OF HUMAN RESOURCE MANAGEMENT**

## **Group Administrator Memo #24-04**

**To:** TLC Group Benefits Administrators

**From:** State and Local Health Benefits Programs

Date: September 27, 2024

**Re:** Dependents Who Lose Eligibility at the End of 2024

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, 2025, 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.

Be sure to reconcile your payroll system with Cardinal 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 found below:

- the incapacitation existed prior to the loss of eligibility due to age
- the dependent resides full time with the employee, retiree group enrollee or other natural or adoptive parent
- the dependent is not married
- the dependent receives his or her financial 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 who are age 26 and losing coverage. Completed requests must be received by the plan prior to January 1, 2025.

## 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
- Sentara Health Plans must contact Sentara at 866-846-2682

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 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 in Cardinal.

The navigation path to the report: Navigator > Benefits > Reports > Audits > Benefit Eligibility Audits

INPUT / SEARCH CRITERIA: Company (Leave Blank for All) Report Type Parameter (check Dependent Child Approaching 26)

**OUTPUT TYPE: WEB** 

FORMAT: XML

NAV225 Generating an HCM Report (virginia.gov) job aid demonstrates how to run a particular report in Cardinal. Steps 8 and 9 of the job aid discusses Run Control ID. For TLC users who do not run many reports, I suggest just using your first name. Once that is added, you will be brought to the Benefits Eligibility Audits page.

- Enter your 3-character Company value (e.g., E07).
- Check the Dependent child Approaching 26 check box.
- Enter 01/01/2024 and 12/31/2024 in the date fields.
- Click on Run.
- Click on OK.
- A process instance number will display below the words Process Monitor. Click on Process Monitor.
- Click on Refresh until the Process Name V\_BN301\_RPT has a Run Status of Success and the Distribution Status of Posted.
- Click on the word Actions then View Log/Trace.
- The Child26.xlsx is the Excel file with the results of the report.

Once this is run one time, the saved Run Control ID will present the same parameters each time you pull this page up.

Please remember that dependents may be entered into Cardinal after the initial report is requested. We recommend running the report again prior to the end of the year. You may contact TLC at <a href="mailto:TLCPolicy@dhrm.virginia.gov">TLCPolicy@dhrm.virginia.gov</a> for assistance with accessing the report.

If timely application for continued coverage for an incapacitated dependent child is made and the approval is not received by December 31, the child will be removed from coverage. Dependents removed from The Local Choice Health Benefits program upon reaching age 26 can only re-enroll in coverage in one very limited situation as defined by the Office of Health Benefits. Upon approval for continuous coverage, the incapacitated dependent may be reinstated retroactively to January 1, 2025.