

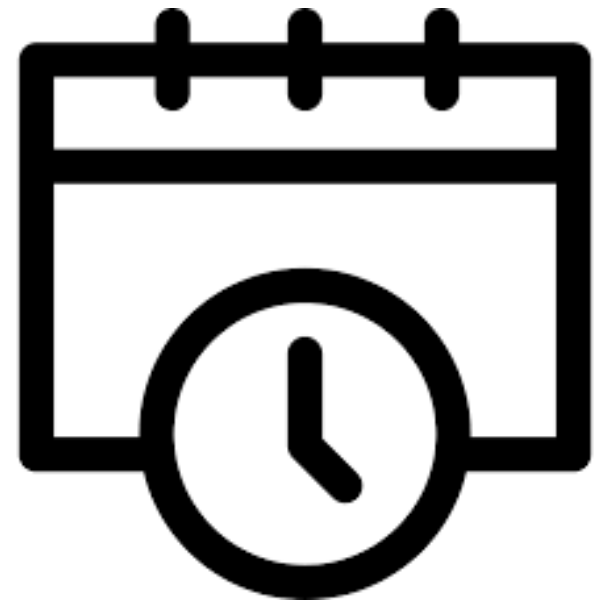
2019 RoadShow



March 5, 2019 through March 22, 2019

Agenda

- Welcome and Introductions
- TLC News and Updates
- CommonHealth
- TLC Basics
- Anthem Medical/MHSA
- Delta Dental
- Renewal Process
- Review and Wrap Up
- Questions?



TLC News and Updates



- New Senior Specialist
- Benefits Administrator training presentation
- Enhanced online renewal with easy navigation

Communications



- **Important!**
- Who to contact:
 - Ann Wohl
 - Freddie Oliver
 - TLC email
- Anne Waring – Communications Manager
 - Can't answer enrollment/eligibility questions
- **Make sure you send to the right Ann W.!**

Communications



- Each group is allowed up to four (4) contacts
- **Keep contacts up to date**
- To update contacts, use the Group Data Change Form.
- Allow up to three (3) weeks for a new contact to gain access to HuRMan reports and be added to the E-News mailing list

Communications



- Who do we have listed as a contact?
- Renewal system will have that information
- Group Data Change Form used to update

Posted on website, <http://www.thelocalchoice.virginia.gov/index.htm>

TLC BENEFIT ADMINISTRATOR TRAINING



TLC Website



- Summary of benefits for all plans offered
- Forms
- Communications
- Member handbooks
- New Benefits Administrator Training Document

TLC Systems

- BES – Eligibility and Enrollment Database
 - BES numbers appear on Participant’s ID cards
- HuRMan–Secure system for group reports
 - Access will become inactive if not accessed every 90 days
- SecurePass – Secure system for Health Benefits Direct (HBD)
 - HBD is the application in SecurePass for ACA certifications and Data Sheets

Billing

- Bills are generated by Anthem
- Contact Anthem for billing questions
- Contact Anthem to get set up for on-line premium payments, if desired
- Customer service **800-552-2682**
- Email for enrollment and billing questions:
 - **TLC-covamembershipinquiries@anthem.com**
- Unfortunately, bills are not available in excel

Premium Payments



- Due on the first working day of the month, payable in advance.
- Considered late if not received by the 10th of the month. Subject to a 1% penalty that cannot be waived.
- If premium and penalty not received by the 20th of the month that may result in claims not being paid.

Break





Employee Wellness Program



YOU ←

All employees participating in TLC Health Benefits Program are eligible

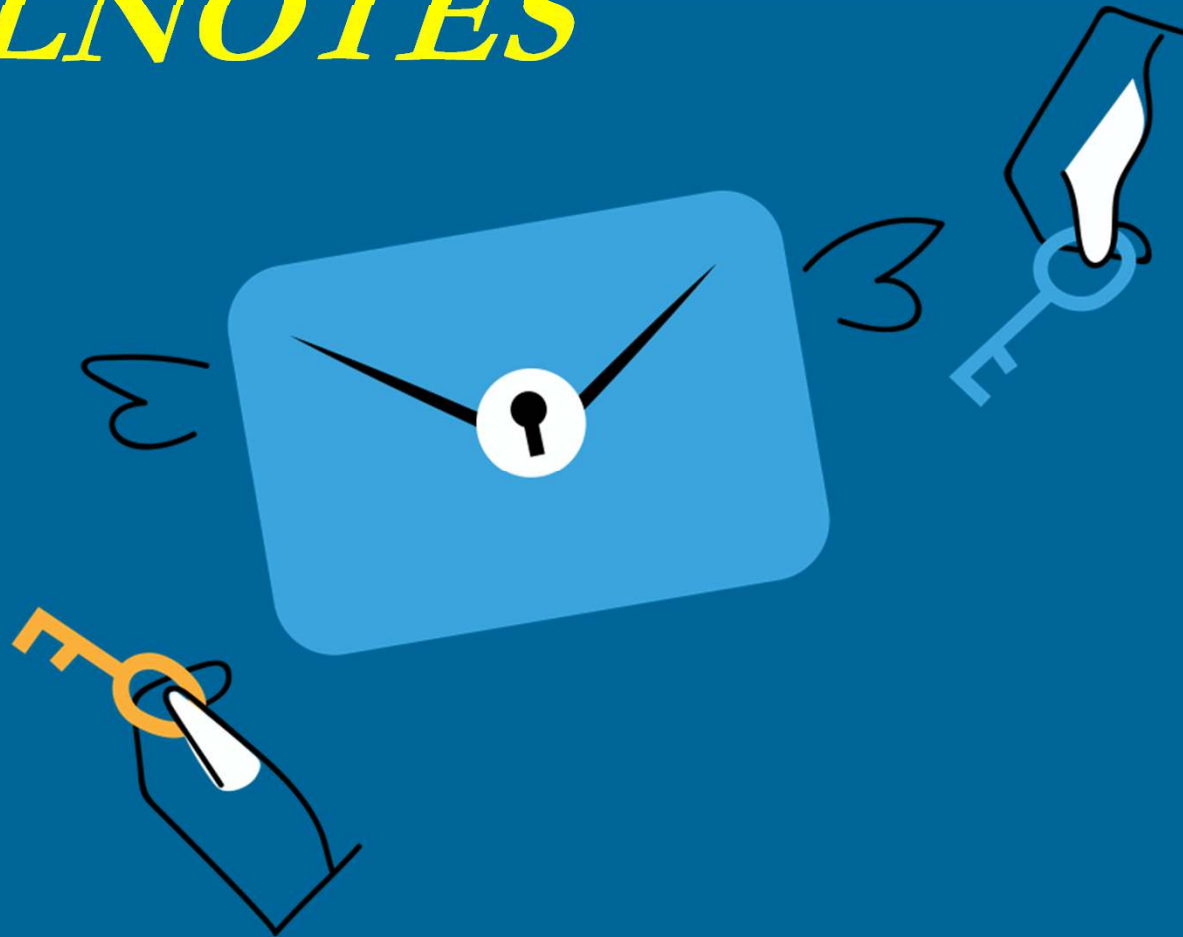
Relax



We've got the information your staff needs to be well



Staying connected with *WELLNOTES*





■ **FREE Health Screening every 2 years**

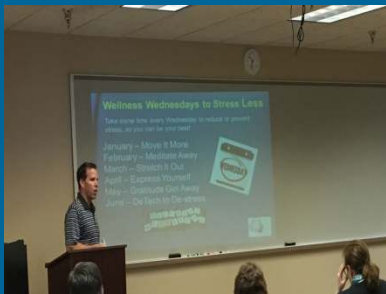
- ❑ **Total and HDL Cholesterol**
- ❑ **Blood Pressure**
- ❑ **Height/Weight and Body Mass Index**
- ❑ **Diabetes Risk Assessment**
- ❑ **Non-fasting and immediate results**
- ❑ **For participating employees and their adult dependents**

~ Contact your Regional Coordinator to schedule; vendor requires 30 day lead time.

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



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
- If you are in KA expanded or KA 250, enroll in the first 16 weeks and the hospital co-pay for delivery is waived (~\$300 value)



CALL 1-800-828-5891

Tobacco Cessation

- FREE tobacco cessation program for health plan participants 18 and older
- Coaching online, telephonically, and via instant messaging
- The support you need when you're ready
- Visit www.anthemear.com, click on member login and enter Commonwealth of Virginia. Choose The Local Choice and select the Live Tobacco Free Center.



Health Education Campaigns



- ***Best Foot Forward***– Your feet are really quite awesome... feet are perfectly designed to give years of service – if you treat them right. Keep them strong on the inside and healthy on the outside.



- ***Re-Learn to Relax***– When's the last time you felt really relaxed, like you could totally unwind? There is a way to slow down and get some real mental and physical health benefits - it's called meditation.

re-learn
to relax



Too busy to breathe?

Is it really
worth the
effort?
I'm busy!



A New Perspective Mindfulness & Meditation



**Meditation is sitting and doing nothing.
Anyone can do that, right?**

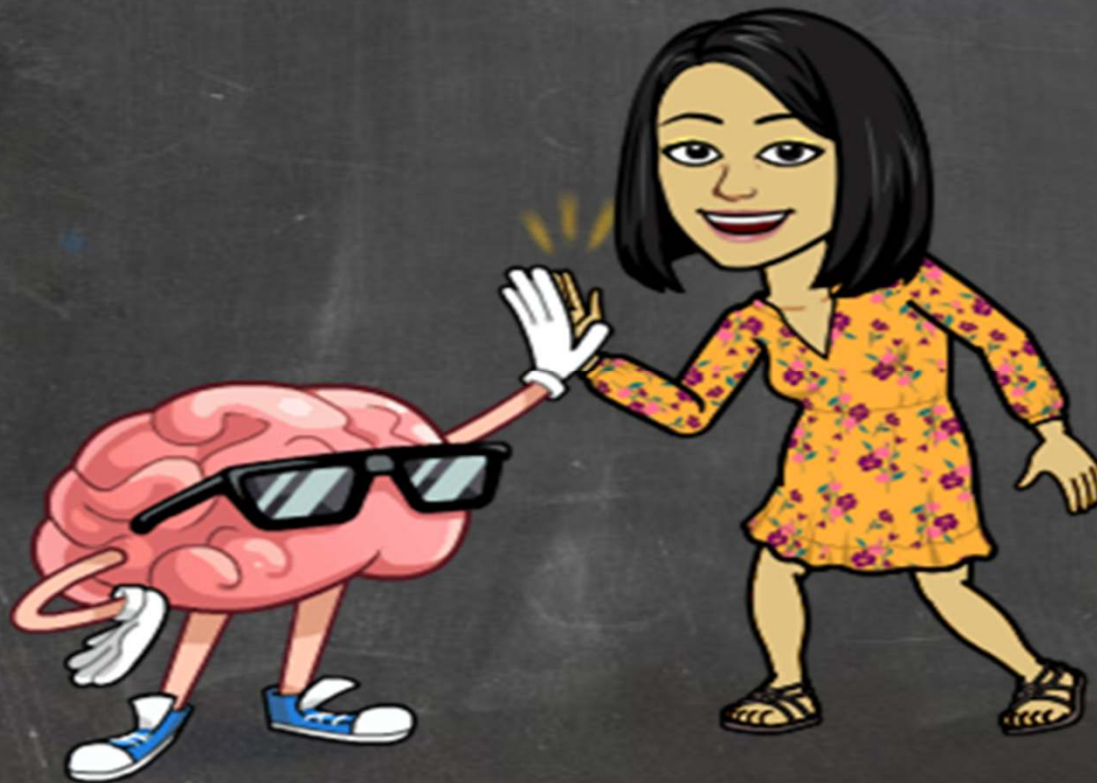
Let's try it...



your body and brain



meditation



All it takes is a call or an email



Regional Coordinators

**Suzanne
Meador**

Southwest

**Susan
Perry**

*Roanoke & New
River Valley*

**Craig
Hicken**

*Petersburg &
South Central*

**Kristina
Fischbach**

*Northwest &
Blue Ridge*

**Amy
Moore**

Northern

**Mary Louise
Gerdes**

*Williamsburg &
East*

**Cynthia
Duncan**

*Tidewater &
Eastern Shore*

**Susan
Lord**

Central

**Mike
King**

Richmond

wellness@DHRM.virginia.gov

Questions?

Vilma Alejandro
Employee Programs Director
Dept. of Human Resource Management
101 N. 14th Street, 12 floor
Richmond, VA 23219

Vilma.alejandro@dhrm.virginia.gov

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Follow us on Twitter

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[commonhealth_va](https://www.instagram.com/commonhealth_va)

[**www.CommonHealth.virginia.gov**](http://www.CommonHealth.virginia.gov)

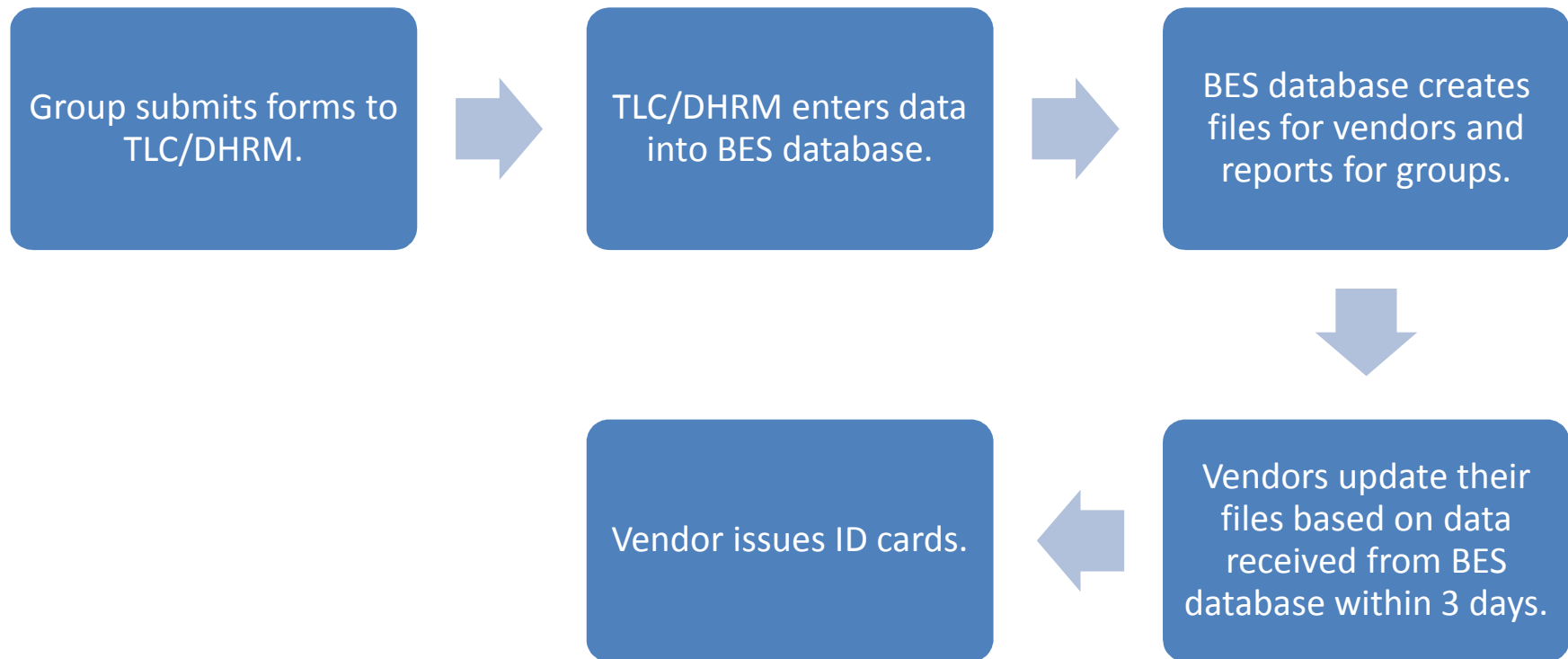


“Welcome to the Diabetic Hotline! If you need a new excuse for cheating on your diet, press 1. If you need a new excuse for skipping your workout, press 2...”

TLC Basics

- Forms, processes and timeframes
- Some duplication from BA Training Presentation created and posted on TLC website
- Need appropriate forms for all enrollment transactions
 - Send to DHRM not Anthem

BES Process



Forms

- 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, and incapacitated adult dependents

Enrollment Form



- Enrollment forms are used for-
 - Initial enrollment
 - Create a waive record
 - Request changes due to qualifying mid-year events (QME)



Enrollment Form

- **Must be completed, in full, even for waivers**
- **Participant must sign and date form**
- **BA must certify form by signing and dating**
- **Incomplete forms will not be processed**
- **New Hire Enrollment forms must have the date of hire and the effective date of coverage for ACA reporting.**

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 social security number as well as date of hire.
- 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.

Effective Dates-New Hires



- You are responsible for monitoring new hire eligibility
- Most groups use first of the month after date of hire
- If you have a new hire waiting period, it must be applied consistently
- Enrollment request must be received within 30 days of employment or newly eligible

Effective Dates-New Hires



- If deadline is missed, they cannot enroll until Open Enrollment or another consistent QME
- Effective date is based on eligibility, not **payroll cycles**

Qualifying Mid-Year Event

- What is a QME?
- Section 125 (pre-tax document) determines what QMEs are allowed
- Examples of QME – marriage, divorce, birth, gain or loss of eligibility for Medicaid.
- Request must be “consistent” with event

Qualifying Mid-Year Event

- If you have a Section 125 document, it should state the timeframe allowed to make an enrollment election change
- If you don't have a document, TLC rules apply.
- TLC allows up to 60 days from the event to make the request.
- Enrollment changes due to a QME are effective the first of the month after the request was made **(form completed, signed and dated)**

Effective Dates-QME's



- If a participant requests a change, have them complete, sign and date the form at that time. Hold it until you receive the supporting documentation.(No more than 30 days)
- We cannot make enrollment changes due to QME effective retroactive to date form is signed

Birth may be a QME

- Participant must complete enrollment form to add a new baby, it is not automatic
- For birth, we don't need the birth certificate or social security number, that just delays the enrollment.
- Proof of birth is usually provided at the hospital
- Effective date of addition of newborn is the first of the month baby was born.

QME: Gain or loss of eligibility for Medicaid

- It is a QME to join TLC if lost eligibility to FAMIS, FAMIS+ or Medicaid.
- It is a QME to drop TLC coverage if gaining eligibility to Medicaid or FAMIS+.
- It is **NOT** a QME to drop TLC if gaining eligibility to FAMIS.
- **IMPORTANT NOTE**: We cannot allow changes due to gain / loss of eligibility to be retroactive.

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.

Termination of Coverage/Waiver

- Group Adjustment Form
 - Used to term a participant's entire record.
 - Do not submit to remove dependents.
 - Needs to be submitted to term a waive record (due to ACA reporting)

Termination Dates



- Coverage should be termed the last day of the month in which they are eligible.
 - Example: If the last day worked was January 10th, coverage should be termed January 31st.
 - Termination is based on loss of eligibility, not **payroll cycles**.



Termination Dates



- Even if you deduct premiums and pay a month in advance, you should refund any premium and Anthem will credit your bill after the termination is processed.
- Participants are not allowed to remain on the plan after they are terminated. COBRA is an option if coverage is needed.

Termination Dates



- Terminations must be reported as soon as possible. If a participant continues to use the coverage after they are no longer eligible, you may be responsible for any prescription drug claims that were paid. TLC can only retract medical and dental claims.
- We can only give premium credit for two (2) months due to a termination.

HuRMan

- Nickname for secure server
- Group reports posted here
- All four(4) contacts get access
- Access for new contact may take up to 3 weeks after we receive updated Group Data Change Form
- Must have BES ID # or SS# and date of birth to set up a new contact.

Reports

- Regularly posted to your HuRMan folder
- Contain very valuable information on your group's data
- Important for IRS form completion (ACA Reconciliation) and routine plan management
- Reports can be downloaded in excel

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
 - Notify TLC of any errors

Reports

- **BES Enrollment Report**
 - Two part report: participants and dependents
 - Created weekly on 3rd, 10th, 17th and 24th
 - First three reports show BES membership in effect on 1st of that Month
 - Last report shows membership as of 1st 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 due to disability.
- **Dependents approaching age 26 termination**
- **Age 26 termination report**

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)
- Must use correct DHRM group numbers on all forms to avoid keying errors and delays

Break





2019 TLC Road Show

March 2019

2019 Renewal



- **No benefit changes, however there are enhancements**
- Please order **open enrollment packets** for all employees, even if there are no benefit changes
- **Only those people making changes** need to complete an application
- **Engage Mobile App**
- **Anthem Health Guide**
- **Mass re-issue of ID cards**



New system. Better experience.



➤ New group numbers

- Group specific details forthcoming

➤ New member ID cards issued

- Members need to use new ID card on effective date

➤ Changes to billing

- New banking information for electronic premium payments and new mailing addresses
- Groups may get more than one bill, before and after the renewal process. They are not duplicates.

New Billing Format

Area 1 Invoice Breakdown:

| Description | Amount |
|---------------------------------|--------------------|
| Invoice Number 000 | |
| Prior Bill Amount | \$ 5,719.06 |
| Amount Paid | - \$ 5,719.06 |
| Prior Balance Due | 0.00 |
| Eligibility Adjustment Subtotal | \$ 278.50 |
| Manual Adjustment Subtotal | \$ 0.00 |
| Membership Detail Subtotal | \$ 3,263.50 |
| Affordable Care Act (ACA) Fees | \$50.00 |
| Total Amount Due | \$ 3,542.00 |

Area 2 Billing Information:

| Field | Value |
|----------------------------|----------------------|
| Bill Entity Name | 90 |
| Bill Entity Street Address | 00 |
| City, State Zip Code | |
| Bill Entity No. | 90 |
| Invoice Number | 00 |
| Billing Period | 04-01-16 to 06-01-16 |
| Date Billed | 03-12-16 |
| Total Due | \$ 3,542.00 |

Payment Instructions:

Enter Amount Paid _____
Make Check Payable To: _____
Anthem Name
Anthem Lockbox Address
City, State, Zip Code

Header: Please Detach And Return This Portion With Your Payment

Footer: SYS DESK BILL ENTITY MBS Due Date
2 N020 90 NUMBER 04-01-16

Member Enhancements



- **Simplified ID card format**
 - ID cards are available online at anthem.com or the Engage mobile app

- **Redesigned Explanation of Benefits (EOB)**
 - More user friendly
 - Once a month

- **Useful information available 24/7**
 - Access information on the Engage app
 - Benefit information, claims summary and details, Care & Cost Finder

Traditional EOB



The new EOB

Anthem Blue Cross and Blue Shield
PO Box 27401
Richmond, VA 23279

Anthem

Don't worry, this is not a bill.

Hi Jane — Here's your **Health Care Summary** as of March 24, 2017.

Also called an Explanation of Benefits (EOB), it's a quick and easy way to see the care you and your family got, and who pays what. Plus ways to save money and stay healthy.

Need help in a different language? Call us. *(Necesita ayuda en español? Llámennos. 1-800-952-2682)*

Helpful resources

Message us: Log in to [anthem.com/tic](#) and select this icon

Call: 1-800-952-2682 (TTY/TDD: #711) Mon - Fri, 8 a.m. - 6 p.m.

Go online: At [anthem.com/tic](#) or use the Anthem Anywhere mobile app.

Look for 2 savings opportunities inside!

| Claims summary | | Preventive care reminders* | |
|------------------------------|----------|--|---|
| Doctor/facility charges: | \$983.00 | <input type="checkbox"/> Breast cancer screening | <input type="checkbox"/> Colon cancer screening |
| Your discounts: | — 584.03 | <input type="checkbox"/> Diabetes check | |
| Due to your doctor/facility: | \$398.97 | For Tom | <input type="checkbox"/> Rii shot |
| Anthem paid: | — 0.00 | <input type="checkbox"/> Child well-care visit | <input type="checkbox"/> Rii shot |
| | | For Ben | <input type="checkbox"/> Rii shot |
| | | <input type="checkbox"/> Child well-care visit | <input type="checkbox"/> Rii shot |

What you pay: \$398.97

Tips and tools

Want us to email you instead? Sign up to get EOBs by email instead of mail. It's easy! Log in to [anthem.com/tic](#). Select this icon then Communication Preferences.

Urgent care without the urgent cost. If it's not an emergency, try an urgent care instead of the ER. It could save you an average of \$500. UrgentCare is close by at 7911 N Michigan Rd, Richmond, VA 23279, 1-804-960-3278.

Anthem Blue Cross and Blue Shield is the trade name of Anthem Health Plans of Virginia, Inc. An independent licensee of the Blue Cross and Blue Shield Association. Anthem Blue Cross and Blue Shield provides administrative claims payment services only and does not assume any financial risk or liability with respect to claims.

65789ANMEMAEB 07/18 Page 1 of 4

New Pharmacy Benefits Management



- **Anthem Pharmacy being implemented 7/1/19 for all TLC groups** regardless of renewal date (7/1 and 10/1 groups)
- **Mail order activity** will be carried over from ESI to Anthem Pharmacy
- Any open/active Prior Authorizations on file with ESI will **auto transfer to Anthem Pharmacy (this includes Step Therapy)**



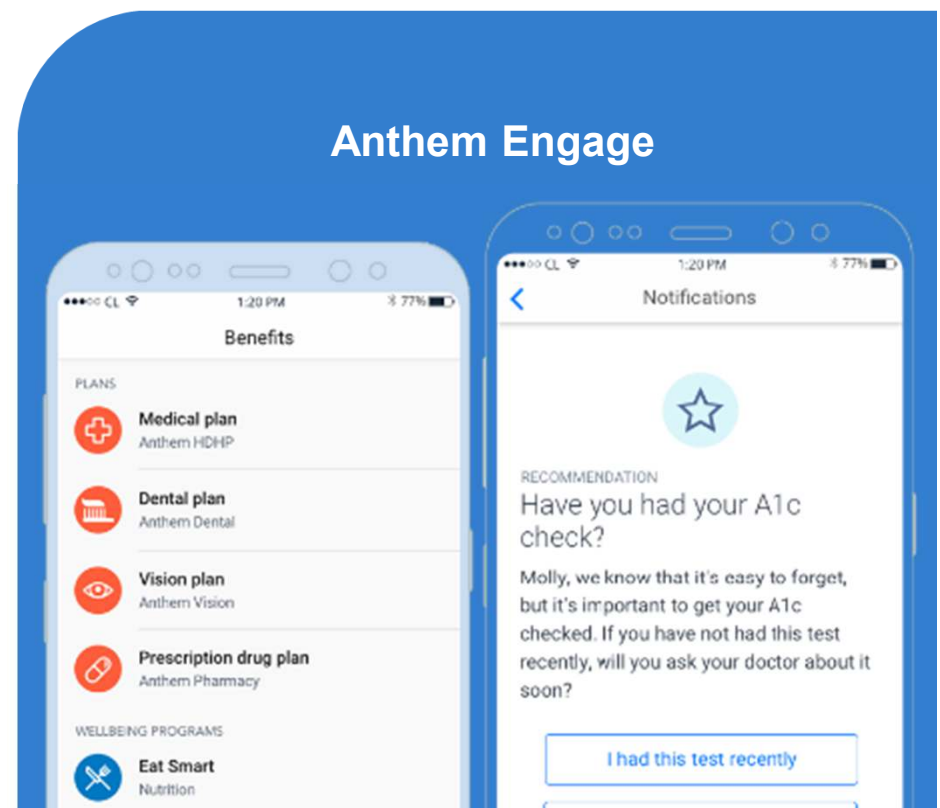
Anthem Engage



Combines powerful clinical data with Anthem's programs to simplify the member experience with a personalized assistant that connects members to the right benefits real time.

It's personalized so members can:

- Access in-app insurance cards
- View all their medical and pharmacy benefits in one place
- Learn more about available health and wellness programs, like 24/7 NurseLine, Condition Care and Future Moms



Anthem Health Guide



Technology that sparks personalized, prioritized support

Member

Call or mobile chat



93.7%

member satisfaction



Health Guide



Risk identification and real-time claims mining prompts prioritized triggers



Speech analytics facilitates additional consultative support



Smart technology matches members with physicians



Online scheduling eliminates “health care homework”



Warm referrals to clinical for coaching, care plans



Transparency tools empower members to find care

Who to Contact



➤ TLC-covamembershipinquiries@anthem.com

- Mailbox is for specific inquiries on member coverage status, etc.
- Billing questions
- ID card questions or member can also call customer service

➤ TLC@dhrm.Virginia.gov

- Group administrators should use this mailbox for:
 - ✓ eligibility questions
 - ✓ all enrollment applications
 - ✓ changes to the BES system

➤ [Anthem Customer Service](#)

- All ID card questions





Questions?

Thank you.

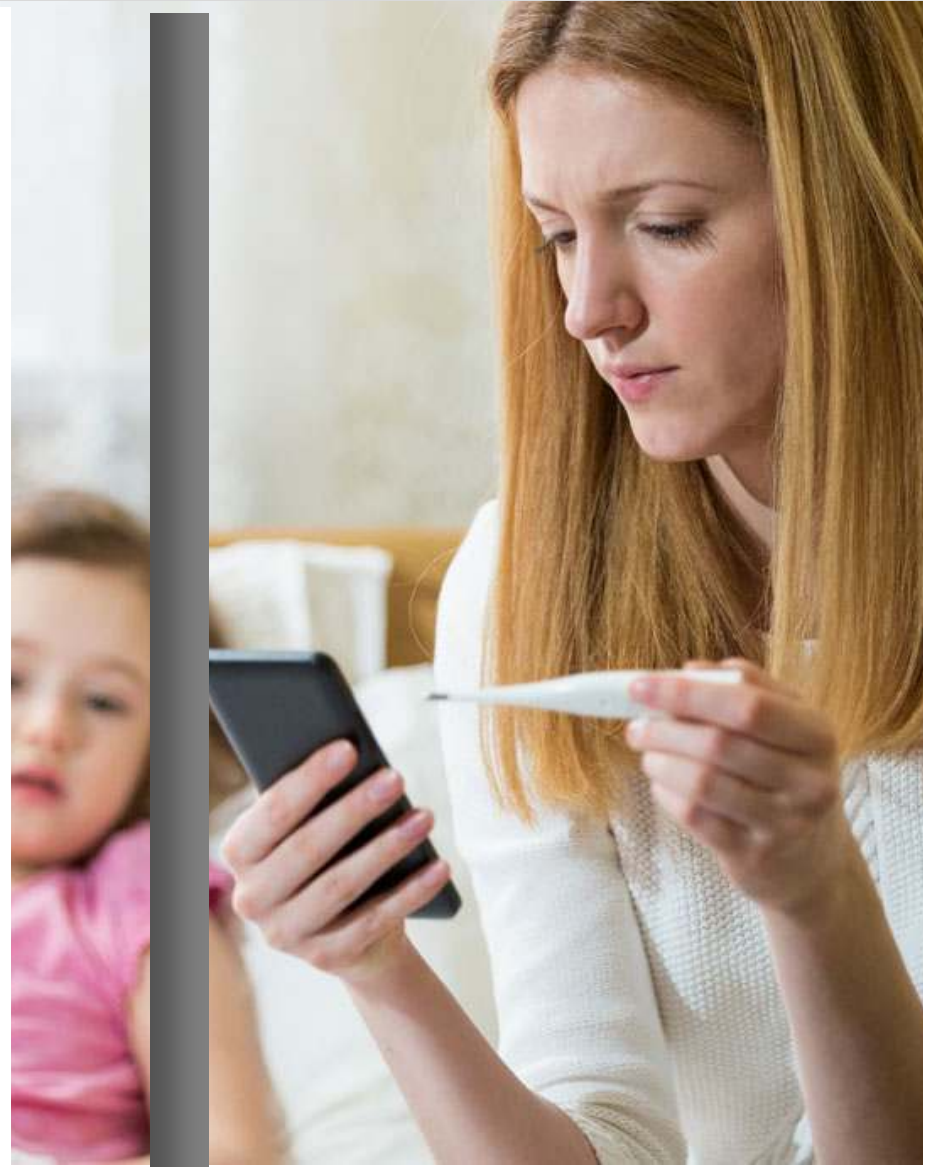


LiveHealth Online

LiveHealth Online Services

- Cost is less than or equal to office visit
- Medical visits with board certified Anthem doctors 24x7/365
- Future Moms Breastfeeding Support
- Behavioral Health services: Psychiatry, Psychology, and EAP
- E-prescribing to your pharmacy of choice*
- Available to Anthem members and non-members

*Only non-controlled substances can be prescribed via video doctor visits

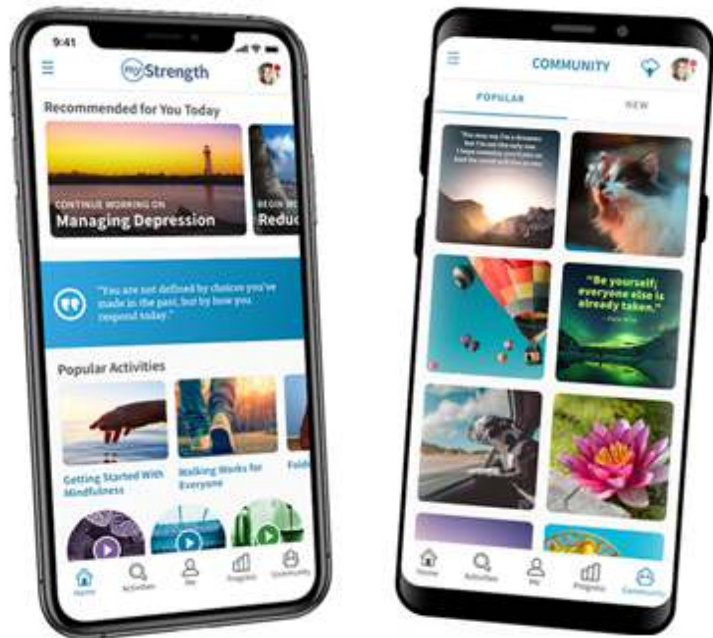


EAP Benefits

- **24/7 call center; online EAP member center/provider finder**
- **Resources for covered employees, their covered dependents, and household members**
- **4 face to face counseling sessions per issue per year**
- **Child and Elder care resources**
- **Legal/Financial services**
- **Identity protection**
- **Work/Life services**
- **Live Tobacco Free smoking cessation program – telephonic coaching and/or QuitNet online program**
- **EAP website – tools, information and resources including Skill Builders training modules www.AnthemEAP.com
Log in: Commonwealth of Virginia, then choose The Local Choice**



myStrength



- Available to all employees and their household members
- Online and mobile resources to support your ongoing emotional wellbeing:
 - Inspirational videos, articles, quotes
 - Stress-management tools
 - Step-by-step eLearning modules to help manage depression, anxiety, stress, substance abuse, sleep issues, mindfulness/meditation, chronic pain, balancing intense emotions, and opioid recovery
- Available 24/7
- Sign up via the EAP website by selecting the myStrength Center

Key Onsite Services

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, employee death, or layoff:

Call 855-223-9277 and press 1 or say *Emergency*

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

- View the catalog on www.AnthemEAP.com under Manager Tools to choose your training topic(s)
- Contact Lynn Vogel lynn.vogel@anthem.com or 804-305-0386 to schedule



HR/Manager Resources

- Manager's Manual –
 - Available on www.anthemEAP.com Login: Commonwealth of Virginia choose The Local Choice and find it under Manager Tools
 - Also available on www.anthem.com/tlc in bottom section under Employee Assistance Program
- Management Consultations
 - Mandatory/voluntary referrals

DAILY BRUSHING WILL MAKE YOUR TEETH
WHITER AND BRIGHTER. IT'S LIKE
UPGRADING YOUR MOUTH
TO HI-DEF!



The Local Choice RoadShow

March 2019



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 2017:
 - 90% of The Local Choice claims were paid to participating Delta Dental dentists
 - Utilization of participating providers has increased over 10% in the last five years

2019-20 TLC Dental Benefits

- Dental benefits for active employees and early retirees 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

Preventive Option

- No contract year deductible
- No contract year maximum (frequency limitations apply to services)
- No coverage for basic, major or orthodontic services
 - 100% coverage for diagnostic and preventive services such as:
 - Two cleanings and exams
 - Two fluoride treatments for dependents under 19
 - Bitewing and full mouth X-rays
 - Sealants for dependents under 19

Comprehensive Option

- \$25 individual/\$75 family contract year deductible (does not apply to diagnostic and preventive services)
- \$1,500 individual contract year maximum (does not apply to diagnostic and preventive services)
- \$1,500 individual lifetime orthodontic maximum
 - 100% coverage for diagnostic and preventive services
 - 80% coverage for primary services
 - 50% coverage for major services and orthodontics

2019 Dental Plan Options

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

By the Numbers

Utilization

- In-network utilization 90.0%
 - PPO Network Utilization 42%
 - Premier Network Utilization 48%
- Members exceeding annual maximum 1.3%
- D&P services (portion of spend) 50.0%
- Total “Delta Dental Difference” Savings \$12,310,740

By the Numbers

Oral Health Analytics

Delta Dental analyzes millions of claims to gauge the oral health of The Local Choice and compares utilization to peer groups

| | Government | Schools |
|-----------------|-------------------|----------------|
| Healthy | 32% | 37% |
| Moderate | 15% | 16% |
| Serious | 10% | 9% |
| No Visit | 43% | 38% |

- Approximately 64% of the No Visit population has not seen a dentist in two years
 - \$422 (Gov't) and \$418 (Schools) higher annual spend for members who have lapse in care

Website Capabilities for Members

Members are able to:

- Check benefits and eligibility
- Find a dentist
- Check claims status
- Look up average charges for dental procedures
- Chat with a Customer Service Representative
- Download forms

The screenshot displays the Delta Dental website interface. At the top, there is a navigation bar with links for 'About Us', 'Careers', and 'Contact Us', along with social media icons for Facebook, Twitter, LinkedIn, Pinterest, YouTube, and Google+. Below this is a main navigation menu with 'Home', 'Subscribers', 'Providers', 'Group Administrators', and 'Brokers'. The 'Subscribers' section is highlighted in green. On the left, there is a 'Subscribers Login' form with fields for 'User Name' and 'Password', a 'Login' button, and links for 'Forgot user name?', 'Forgot password?', and 'New Users Register Here'. Below the login form is a 'Find a Dentist' section with a text input for 'Enter Address or Zip Code', a 'Find' button, and a link 'Does my dentist participate?'. At the bottom left, there is a section titled 'Delta Dental Offers Individual Insurance!' with a sub-link 'Delta Dental of Virginia'. The main content area features a large image of a smiling man sitting on a chair, with a smaller inset image of a woman and a child. To the right of the image, there are three main sections: 'Your Benefits' (Review your benefits, Print your ID card, See when you're eligible for your next cleaning, And much more!), 'Your Claims' (Check on the status of your claim, See how much Delta Dental paid, View your Explanation of Benefits), and 'Your Cost Estimator' (Plan for upcoming expenses, Look up average charges for dental procedures). At the bottom of the main content area, there are links for 'View a video tutorial' and 'View a Quick Reference Guide', and a 'New Users Register Here' button. The footer contains links for 'Understanding Your', 'Frequently Asked', and 'Commonwealth of'.

Mobile App

Members can use the same login information they use for the website. Once logged in, they can:

- Check coverage and review claims

Members do not need to log in to:

- Find a dentist
- Brush with the Toothbrush Timer!



Break



Renewal Process

- Group Data WorkSheet may be accessed from TLC website.
 - **Note: it is a worksheet – you don't have to use it.**
- Renewal must be accessed and submitted via secure system similar to last year
- You must complete **ALL** sections of Group Data Sheet to submit, including rates / contributions for Preventive dental option

2018-19 Employer Data Worksheet for TLC Health Benefits Program

This is a Worksheet only.

Contact Ann Wohl at DHRM with any questions about this form.

Phone: (804) 371-0185
Email: Ann.Wohl@dhrm.virginia.gov

Group Information:

1. Enter the group name.

Group Name:

2. Check one:

Stand-alone Government Group Stand-alone School Group Combined Government & School Group

3. Check one and enter dates.

| | | |
|--|----------------------------------|--------------------------------|
| <input type="checkbox"/> Existing Group—July Renewal | Plan Year Begins: 07 / 01 / 2018 | Plan Year Ends: 06 / 30 / 2019 |
| <input type="checkbox"/> Existing Group—October Renewal | Plan Year Begins: 10 / 01 / 2018 | Plan Year Ends: 09 / 30 / 2019 |
| <input type="checkbox"/> Existing Group—Mid-Year Plan Change | Change Begins: / 01 / | Plan Year Ends: / 30 / |
| <input type="checkbox"/> New Group | Plan Year Begins: / 01 / 2018 | Plan Year Ends: / 30 / 2019 |

Federal Employer Identification Number(s) and DHRM Group Number(s):

4. A group must have a subdivision for each Federal Employer Identification Number (FEIN). Subdivisions with the same FEIN are also permitted.

Check one: This group has only one subdivision.
 This group has more than one subdivision.

Enter the information for each subdivision. List the primary subdivision (leader) first.

| Subdivision Name <small>List the primary subdivision (leader) first.</small> | Subdivision FEIN | Subdivision Type | DHRM Group Number | | |
|---|------------------|---|-------------------|-----|------|
| | | | Agr. | Gr. | Sch. |
| | | <input type="checkbox"/> Government <input type="checkbox"/> School | | | |
| | | <input type="checkbox"/> Government <input type="checkbox"/> School | | | |
| | | <input type="checkbox"/> Government <input type="checkbox"/> School | | | |
| | | <input type="checkbox"/> Government <input type="checkbox"/> School | | | |
| | | <input type="checkbox"/> Government <input type="checkbox"/> School | | | |
| | | <input type="checkbox"/> Government <input type="checkbox"/> School | | | |
| | | <input type="checkbox"/> Government <input type="checkbox"/> School | | | |
| | | <input type="checkbox"/> Government <input type="checkbox"/> School | | | |

2018-19 TLC Employer Data Worksheet-120717.docx

1 of 4

Renewal Process

- Deadline for submission is April 1, 2019 for July renewals; July 1, 2019 for October renewals
- May request a 30 day extension by sending email to Ann Wohl or Freddie Oliver.
- Extensions are only for submission of forms
- Per Code section, *IVAC55-20-300*, TLC requires at least 90 days written notice to terminate coverage

Renewal Process

Access online Group Data Sheet via secure portal.

Complete ALL sections of the Group Data Sheet including rates/contributions for preventive dental option.

Deadline for submission is April 1, 2019!

Renewal Process



Renewals will be processed in the order they are received.



Once approved you will receive a confirmation.



Any forms that are received late may cause a delay in the set-up of your group and ID cards being produced and released.

Renewal Process

- Renewal system
- Pre-populates your renewal rates
- Enhancements this year include:
 - Status indicator
 - Direct link to email for guidance
 - Help information – pop-up for each section
 - Indicator when electing different from current
 - Pop-up once submitted



Section 1 (applies to whole group)

Step 1: Group

Step 2: Classifications

Step 3: Election Rules

Step 4: Participation

Step 5: Plans

Section 2 (applies to specific Group ID)

Step 6: Premiums

Step 7: ACA Reporting

Step 8: OE Dates

Step 9: Contacts

Section 3 (applies to whole group)

Step 10: Certification

Approval *

History

Group Name:

Plan Year:

2019 - 2020

Effective Date:

Plan Year 2019: New DataSheet

Section 1

The Local Choice (TLC)

Status: Submitted

1: Group

2: Classifications

3: Election Rules

4: Participation

5: Plans

Review and certify the Group information. Then, click 'Next'.

Report any discrepancy to your [TLC Program Specialist](#).

[Help](#)

Effective Date

Expiration Date

Name

Type

- Government Group
- School Group
- Government & School Group
- Grandfathered Government & School Group

Renewal

- July



- Section 1 (applies to whole group)
- Step 1: Group ***
- Step 2: Classifications *
- Step 3: Election Rules *
- Step 4: Participation *
- Step 5: Plans *

- Section 2 (applies to specific Group ID)
-
- Step 6: Premiums *
- Step 7: ACA Reporting *
- Step 8: OE Dates *
- Step 9: Contacts
-
- Step 6: Premiums *
- Step 7: ACA Reporting *
- Step 8: OE Dates *
- Step 9: Contacts
-
- Step 6: Premiums *
- Step 7: ACA Reporting *
- Step 8: OE Dates *
- Step 9: Contacts

Group Name: Plan Year: 2019 - 2020 Effective Date: Plan Year 2019: New DataSheet

Section 1

The Local Choice (TLC) Status: In Process from New

- 1: Group ***
- 2: Classifications
- 3: Election Rules *
- 4: Participation
- 5: Plans *

Review and certify the Group information. Then, click 'Next'. Report any discrepancy to your TLC Program Specialist.

* Required to submit this Data Sheet.

Number

Temporal Key 300

Effective Date 7/1/2019

Expiration Date 7/1/2020

Yes No Is New Group

Yes No Will renew next year?

Name

Type Government Group School Group



Section 1 (applies to whole group)

Step 1: Group *

Step 2: Classifications *

Step 3: Election Rules *

Step 4: Participation *

Step 5: Plans *

Section 2 (applies to specific Group ID)

Step 6: Premiums

Step 7: ACA Reporting *

Step 8: OE Dates *

Step 9: Contacts

Step 6: Premiums *

Step 7: ACA Reporting *

Step 8: OE Dates *

Step 9: Contacts

Step 6: Premiums *

Step 7: ACA Reporting *

Step 8: OE Dates *

Step 9: Contacts

Group Name:

Plan Year:

Effective Date:

[Redacted]

2019 - 2020

Plan Year 2019: New DataSheet

Section 1

The Local Choice (TLC)

Status: In Process from New

1: Group *

2: Classifications *

3: Election Rules *

4: Participation *

5: Plans *

Review and certify the Group information. Then, click 'Next'.

Report any discrepancy to your TLC Program Specialist.

Help

* Required to submit this Data Sheet.

Number

[Redacted]

Temporal Key

300

Effective Date

7/1/2019

Expiration Date

7/1/2020

Yes No

Is New Group

Yes No

Will renew next year?

Name

[Redacted]

Type

Government Group
 School Group

Help for Group

A group must have a separate Group ID, assigned by DHRM-TLC, for each Federal Employer Identification Number (FEIN) included in the group. Separate Group IDs with the same FEIN are also permitted. One of the Group IDs must be primary for submitting a renewal Data Sheet. Unless otherwise approved by DHRM-TLC, the Group ID with most participants is primary.

Contact your [TLC Program Specialist](#) with questions.

Ok

Section 1 (applies to whole group)

Step 1: Group *

Step 2: Classification *

Step 3: Election Rules

Step 4: Participation *

Step 5: Plans *

Section 2 (applies to specific Group ID)

Step 6: Premiums

Step 7: ACA Reporting *

Step 8: OE Dates *

Step 9: Contacts

Step 6: Premiums *

Step 7: ACA Reporting *

Step 8: OE Dates *

Step 9: Contacts

Step 6: Premiums *

Step 7: ACA Reporting *

Step 8: OE Dates *

Step 9: Contacts

Number

Temporal Key 300

Effective Date 7/1/2019

Expiration Date 7/1/2020

Yes No Is New Group

Yes No Will renew next year?

Name

Type Government Group

School Group

Section 1 (applies to whole group)

Step 1: Group

Step 2: Classifications *

Step 3: Election Rules *

Step 4: Participation *

Step 5: Plans *

Section 2 (applies to specific Group ID)

Step 6: Premiums *

Step 7: ACA Reporting *

Step 8: OE Dates *

Step 9: Contacts

Step 6: Premiums *

Step 7: ACA Reporting *

Step 8: OE Dates *

Step 9: Contacts

Step 6: Premiums *

Step 7: ACA Reporting *

Step 8: OE Dates *

Step 9: Contacts

Group Name:

Plan Year:

Effective Date:

2019 - 2020

Plan Year 2019: New DataSheet

Section 1

The Local Choice (TLC)

Status: In Process from New

1: Group

2: Classifications *

3: Election Rules *


4: Participation *

5: Plans *

Make a selection for each Classification and Billing Method. Then, click 'Next'.
Contact your TLC Program Specialist with questions.

[Help](#)

* Required to submit this Data Sheet.

- Yes No Full-time Employees
 - Group Bill
- Yes No Part-time Employees  This is different from your last renewal
 - Group Bill
- Yes No * Elected Officials with full-time premium
 - Group Bill
- Yes No * Elected Officials with part-time premium
 - Group Bill
- Yes No Long-Term Disability (LTD) Employees
 - NA
- Yes No Extended Coverage/COBRA Qualified Beneficiaries - Regular
 - Group Bill
 - Direct Bill Subscriber
 - Third-Party Administrator (TPA)
- Yes No Extended Coverage/COBRA Qualified Beneficiaries - Disability
 - Billed as COBRA - Regular

2019 DataSheet Received

Download a copy for your records.

Ok

Section 1 (applies to whole group)

Step 1: Group

Step 2: Classifications

Step 3: Election Rules

Step 4: Participation

Step 5: Plans

Section 2 (applies to specific Group ID)

Step 6: Premiums

Step 7: ACA Reporting

Step 8: OE Dates

Step 9: Contacts

Section 3 (applies to whole group)

Step 10: Certification

Approval *

History

New DataSheet

1: Group

2: Classifications

3: Election Rules

4: Participation

5: Plans

Review and certify the Group information. Then, click 'Next'.
Report any discrepancy to your TLC Program Specialist.

Help

Effective Date 7/1/2019

Expiration Date 7/1/2020

Name [REDACTED]

- Type
- Government Group
 - School Group
 - Government & School Group
 - Grandfathered Government & School Group

Renewal July

Section 1 (applies to whole group)

Step 1: Group *

Step 2: Classifications *

Step 3: Election Rules *

Step 4: Participation *

Step 5: Plans *

Section 2 (applies to specific Group ID)

Board of Supervisors

Step 6: Premiums *

Step 7: ACA Reporting *

Step 8: OE Dates *

Step 9: Contacts

DSS

Step 6: Premiums *

Step 7: ACA Reporting *

Step 8: OE Dates *

Step 9: Contacts

Library

Step 6: Premiums *

Step 7: ACA Reporting *

Step 8: OE Dates *

Step 9: Contacts

Group Name:

Plan Year:

Effective Date:

2019 - 2020

Plan Year 2019: New DataSheet

Section 1

The Local Choice (TLC)

Status: In Process from New

1: Group *

2: Classifications *

3: Election Rules *

4: Participation *

5: Plans *

Review and certify the Group information. Then, click 'Next'.

Report any discrepancy to your TLC Program Specialist.

Help

* Required to submit this Data Sheet.

Number

Temporal Key

300

Effective Date

7/1/2019

Expiration Date

7/1/2020

Yes No

Is New Group

Yes No

Will renew next year?

Name

Type

Government Group

School Group

Open Enrollment

- IRS requires that Open Enrollment dates submitted on Renewal Data Sheet must be honored.
- Signature dates and forms received dates must be within OE window.
- Changes outside OE require consistent Qualifying Mid-Year Event or will be denied.



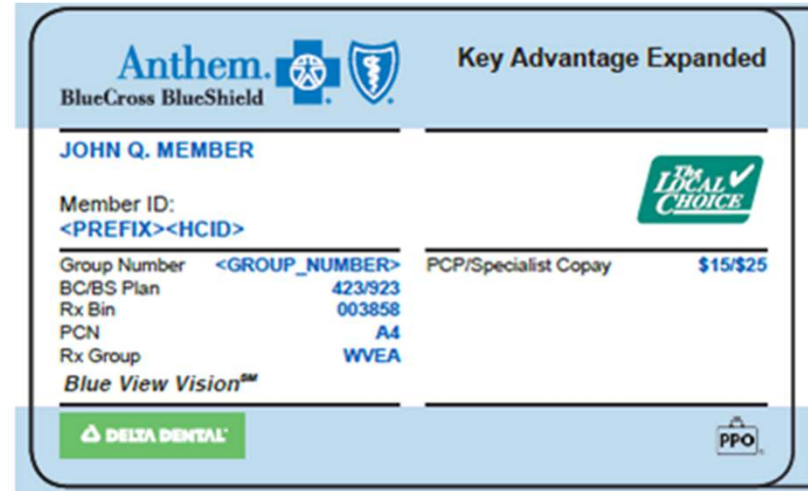
Open Enrollment

- Don't forget your COBRA and retiree participants – even if direct billed
- Only send enrollment forms for new enrollments and changes
- Verify enrollment forms agree with your internal OE paperwork



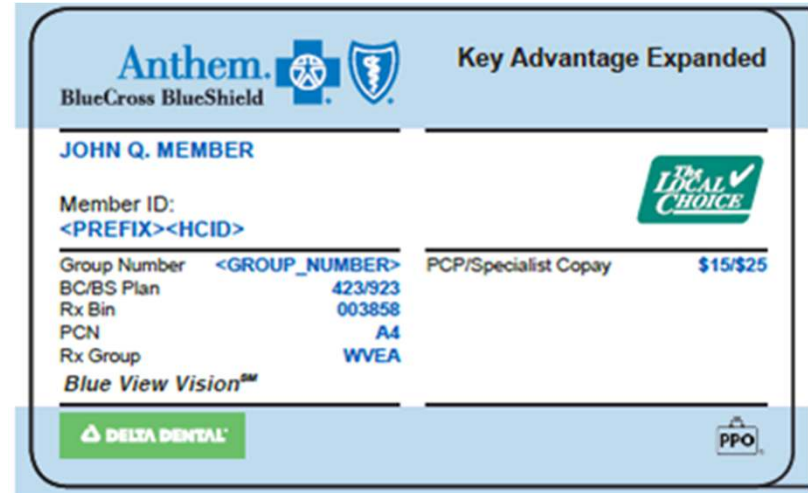
ID Cards

- Not issued until 3 weeks prior to effective date.
- Sent to participant's address on file with DHRM.
- If incorrect or illegible, card may be delayed.
- Always confirm address on HuRMan Enrollment report before requesting duplicates.



ID Cards

- Duplicate cards available by calling:
 - Customer Service
(800) 552-2682
 - ID Card Hotline
(866) 587-6713
- After effective date, electronic copy available at anthem.com



Summary Benefits and Coverage (SBC)

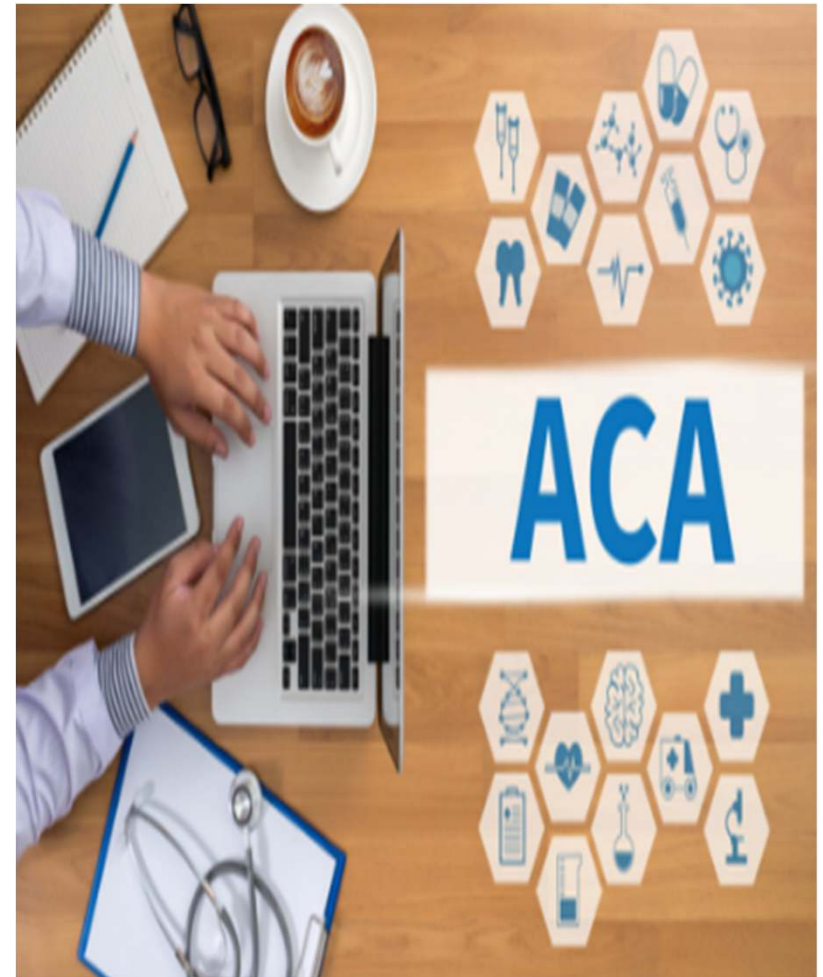
- We follow the Federal guidelines.
- Again this year, we will send out a postcard to all current participants letting them know the SBC is available on the web (link provided) and in paper form upon request.
- This will save us from sending out copies that are not used and hopefully avoid confusion.

Review and Wrap Up



IRS Forms 1094 and 1095

- If your group has been with TLC for the entire Calendar year, we will do your reporting (unless you opt out).
- For us to do your reporting, we need a signed agreement, you need to complete the ACA reconciliation and submit an ACA Certification by the requested due date.
- No corrections for personal data errors



Retiree Plan Eligibility (if offered)

- **Retirees and/or their Dependents Not Eligible for Medicare may be enrolled in:**
 - Key Advantage Plans
 - HDHP
 - Kaiser
- **Retirees and/or their Dependents Eligible for Medicare may only be enrolled in:**
 - A65 or A65 w/DV or Medicare Complementary
 - They **cannot** remain in Key Advantage Plans, HDHP or Kaiser Plans.



Retiree Coverage



- Your group has three (3) choices:
 - Not to offer retiree coverage
 - Offer coverage only to “early” retirees (retirees and their dependents not yet eligible for Medicare)
 - Offer coverage to both “early” retirees and retirees and dependents eligible for Medicare



Retiree Coverage



- If you offer “early” retiree coverage:
 - They can remain on Key Advantage plans
 - They must complete an enrollment form to move to that group



Retiree Coverage



- Once a retiree and/or dependent is eligible for Medicare:
 - They **cannot** remain on Key Advantage
 - Must move to Medicare supplement (Advantage 65), if offered by your group
 - Enroll in COBRA
 - Terminate coverage



Retiree Coverage



- “Early” retirees and/or retirees eligible for Medicare may be group billed or direct billed.
- The group decides billing option and can only be changed at renewal

Billing Options for **Retirees and COBRA**

- Group decides at renewal if they want group billing or direct billing.
- If you choose direct billing, the participant is still a part of your group for enrollment and OE purposes.
- Direct billing allows participant an opportunity to set up ACH with Anthem
- Coverage termed due to non-payment of premium will not be reinstated
- Group needs to send Group Adjustment Form to term coverage even if direct billing is used

Extended Coverage/COBRA



- All TLC Groups must offer
- COBRA election notice, with instructions, on TLC website
- To enroll a participant you must complete COBRA election form and TLC enrollment form
- Enrollment form must have COBRA end date

Extended Coverage/COBRA



- COBRA is continuation of same coverage enrolled in prior to qualifying event
- Timeframes for election of and premium payments due are determined by federal law

Extended Coverage/COBRA



- COBRA participants must be informed of open enrollment premium and plan changes
- Even with Direct Bill, you are still responsible for submitting the appropriate forms to terminate a COBRA participant's coverage.

Extended Coverage/COBRA



- If you choose to use a TPA for administration, please note we can only accept enrollment elections, changes and terminations using TLC forms and must be certified by you.
- COBRA deadlines will not be extended due to use of a TPA.
- Each group is responsible for tracking when COBRA ends and submit the appropriate forms.

Extended Coverage/COBRA



- In the event a participant is on COBRA longer than they are eligible, we will retroactively terminate their coverage to the last day they were eligible.
- Medical claims will be retracted and pharmacy claims paid will be the responsibility of the group or participant.

Direct Bill / Group Bill Options

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

- Direct bill members receive their monthly premium billing statements directly from Anthem around the 10th of the month, due in advance.
- **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 / Group Bill Options

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

- Direct bill is not available for use with Third Party Administrator (TPA) services.
- It is the BA's responsibility, even for Direct bill participants, to submit appropriate forms for terms and/or changes.
- It is the BA's responsibility to keep Direct bill participants informed of plan changes and open enrollment election timeframes.
- Direct bill members may sign up for automatic bank draft. Contact Anthem for the forms.

Active employees who become eligible for Medicare

- Active employees and their covered dependents may remain on your plan even if they become eligible for Medicare
- If choose to enroll in Medicare, TLC plan is primary
- Active employees, or their dependents, are **NOT** eligible to enroll in your Medicare supplemental plan

Wrap-up and Review

- If we key something incorrectly, we need to know ASAP.
- If not fixed early, it creates problems.
- Helpful if you reconcile your bill and review HuRMan reports for accuracy.
- If you employ both husband and wife, unless they are enrolled separately, we need a waive form on one of them

Wrap-up and Review

- Once divorced, ineligible dependents (ex-spouse and stepchildren) must be termed end of month divorce is final.
- Once employee leaves, must be termed last day of month, even if premium has been paid.
- Enrollment forms must be complete and legible, there are 3 places for the SSN on the enrollment form, make sure they are all the same number and readable.
- Personal Data Change form is available for address changes, name changes and submission of SSN

Questions??

The Local Choice

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