



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

SARA REDDING WILSON  
 DIRECTOR

James Monroe Building  
 101 N. 14<sup>th</sup> Street  
 Richmond, Virginia 23219

To: Extended Coverage/COBRA Qualified Beneficiaries in the Commonwealth of Virginia Health Benefits Program

From: Office of State and Local Health Benefits Programs

Date: April 25, 2017

Subject: OPEN ENROLLMENT

**Annual Open Enrollment through May 15, 2017**  
**Effective July 1, 2017**

Your annual Open Enrollment is available **through May 15** and provides your annual opportunity to make changes to your health plan and membership level. Changes will be effective July 1, 2017, if you continue to be eligible for coverage. This booklet includes information about coverage options in the new plan year, and the enclosed **2017 - BENEFITS AT A GLANCE** provides a benefit comparison to help you choose your plan.

**Monthly Premium Costs Effective July 1, 2017**

Following are your plan choices and monthly premiums starting July 1, 2017. If you continue to be eligible and enroll in either the COVA Care or COVA HealthAware Plan, the premiums in the following charts can be reduced by completing the requirement to earn a premium reward (see shaded premiums). See pages 2-3 for more information about starting or continuing premium rewards.

**18 or 36-Monthly Extended Coverage/COBRA Participants**

|   | Single | Two-Person | Family  |
|---|--------|------------|---------|
| COVA Care (with preventive dental)                              | \$750  | \$1,387    | \$2,011 |
| COVA Care + Out-of-Network                                      | \$767  | \$1,412    | \$2,044 |
| COVA Care + Expanded Dental                                     | \$781  | \$1,447    | \$2,104 |
| COVA Care + Out-of-Network + Expanded Dental                    | \$799  | \$1,472    | \$2,137 |
| COVA Care + Expanded Dental + Vision and Hearing                | \$800  | \$1,479    | \$2,147 |
| COVA Care + Out-of-Network + Expanded Dental + Vision & Hearing | \$817  | \$1,503    | \$2,180 |
| COVA HealthAware (with preventive dental)                       | \$678  | \$1,258    | \$1,819 |
| COVA HealthAware + Expanded Dental                              | \$709  | \$1,319    | \$1,910 |
| COVA HealthAware + Expanded Dental & Vision                     | \$720  | \$1,336    | \$1,934 |
| COVA HDHP (with preventive dental)                              | \$562  | \$1,044    | \$1,526 |
| COVA HDHP + Expanded Dental                                     | \$593  | \$1,105    | \$1,618 |
| Kaiser Permanente HMO**   | \$638  | \$1,173    | \$1,709 |

**29-Month (Disability Extension) Extended Coverage/COBRA Participants**

|   | Single  | Two-Person | Family  |
|---|---------|------------|---------|
| COVA Care (with preventive dental)                              | \$1,103 | \$2,040    | \$2,958 |
| COVA Care + Out-of-Network                                      | \$1,128 | \$2,076    | \$3,006 |
| COVA Care + Expanded Dental                                     | \$1,149 | \$2,129    | \$3,095 |
| COVA Care + Out-of-Network + Expanded Dental                    | \$1,175 | \$2,165    | \$3,143 |
| COVA Care + Expanded Dental + Vision and Hearing                | \$1,176 | \$2,175    | \$3,158 |
| COVA Care + Out-of-Network + Expanded Dental + Vision & Hearing | \$1,202 | \$2,211    | \$3,206 |
| COVA HealthAware (with preventive dental)                       | \$998   | \$1,850    | \$2,675 |
| COVA HealthAware + Expanded Dental                              | \$1,043 | \$1,940    | \$2,810 |
| COVA HealthAware + Expanded Dental & Vision                     | \$1,059 | \$1,965    | \$2,844 |
| COVA HDHP (with preventive dental)                              | \$827   | \$1,536    | \$2,244 |
| COVA HDHP + Expanded Dental                                     | \$872   | \$1,625    | \$2,379 |
| Kaiser Permanente HMO**   | \$938   | \$1,725    | \$2,513 |

\*\*Kaiser Permanente HMO is only available to participants who live in the Kaiser service area. If you are a current Kaiser member and do not live in its service area, you must make another plan selection. You may confirm the Kaiser service area by contacting Kaiser directly—see *Resources* on page 6 of this booklet for contact information.

**Your premium billing administrator will be:**

| <i>If your plan is:</i> | <i>You will be billed by:</i>     |
|-------------------------|-----------------------------------|
| COVA Care               | Anthem Blue Cross and Blue Shield |
| COVA HealthAware        | Payflex                           |
| COVA HDHP               | Anthem Blue Cross and Blue Shield |
| Kaiser Permanente HMO   | Kaiser                            |

**Have You Earned a Premium Reward?**

During your COBRA eligibility period, if you maintain coverage and are enrolled in either a COVA Care or COVA HealthAware Plan, you can reduce your monthly premium by completing the below healthy action:

- ✓ Complete or update your online health assessment

Both you and your covered spouse, if applicable, are eligible to earn a premium reward of \$17 per month (maximum \$34 premium reduction if both you and your covered spouse complete the requirement).

- **If you are already receiving the maximum premium reward**, it will continue through June 30, 2017, without any additional action. However, you must update your online health assessment between May 1—15 to continue your reward starting July 1. If no Health Assessment is completed during this time, any existing premium reward will be terminated on June 30, 2017.
- **If you have been previously eligible for a premium reward but never met the requirement**, and you will still be covered in a COVA Care or COVA HealthAware Plan starting July 1, you can earn a premium reward by completing and submitting an online health assessment between May 1<sup>st</sup> and May 15<sup>th</sup>. The reward will be effective July 1, 2017.
- COVA Care and COVA HealthAware enrollees, including those who enroll during the plan year can earn a reward after July 1 at any time during the plan year if the requirement is met. Refer to the chart below for specifics on timing of the reward:

| Complete Health Assessment on these dates: | Reward is effective on this date: |
|--|-----------------------------------|
| 5/16/2017 through 6/15/2017                | 8/1/2017                          |
| 6/16/2017 through 7/15/2017                | 9/1/2017                          |
| 7/16/2017 through 8/15/2017                | 10/1/2017                         |
| 8/16/2017 through 9/15/2017                | 11/1/2017                         |
| 9/16/2017 through 10/15/2017               | 12/1/2017                         |
| 10/16/2017 through 11/15/2017              | 1/1/2018                          |
| 11/16/2017 through 12/15/2017              | 2/1/2018                          |
| 12/16/2017 through 1/15/2018               | 3/1/2018                          |
| 1/16/2018 through 2/15/2018                | 4/1/2018                          |
| 2/16/2018 through 3/15/2018                | 5/1/2018                          |
| 3/16/2018 through 4/15/2018                | 6/1/2018                          |

To complete your online health assessment register at [www.myactivehealth.com/COVA](http://www.myactivehealth.com/COVA).

- You and your covered spouse need to register separately to complete your individual health assessments.
- If you don't have internet access, contact ActiveHealth Management at 866-938-0349 for assistance.

***More Flexibility!*** If you add an eligible spouse during the new plan year, he or she will become eligible for the reward once the requirement has been met. The reward will be effective based on the above schedule.

### **Plan Highlights for July 1**

#### **All State Employee/Retiree Health Benefits Plans:**

**Affordable Care Act (ACA):** All plans will comply with ACA Section 1557, Nondiscrimination in Health Programs and Activities.

#### **COVA Care and COVA HDHP Plans:** *LiveHealth Online Adds Psychology and EAP.*

**LiveHealth Online Psychology:** Plan participants enrolled in either the COVA Care or COVA HDHP plans will now be able to make an appointment with a licensed therapist using LiveHealth Online Psychology. Services include assistance with dealing with anxiety, depression, grief, and panic attacks. Daytime, evening and weekend appointments are available. Members can schedule an appointment online or call 1-844-784-8409. The cost is the same as an outpatient behavioral health office visit.

**Employee Assistance Program (EAP):** LiveHealth Online allows plan members to consult with a counselor as part of their EAP benefit at no cost. Plan participants can call 1-855-223-9277 to get their coupon code and details on how to make an appointment.

You can register now at [www.livehealthonline.com](http://www.livehealthonline.com) or download the app.

#### **COVA Care, COVA HDHP and COVA HealthAware Plans:** *MyStrength Online Tool*

**MyStrength Online** tool helps members deal with such health issues as chronic pain, depression, substance abuse and anxiety. Plan Members may obtain more information about this tool by visiting their plan's EAP website:

- **COVA Care and COVA HDHP:** visit [www.AnthemEAP.com](http://www.AnthemEAP.com). The company code is: Commonwealth of Virginia.
- **COVA HealthAware:** visit [www.mylifevalues.com](http://www.mylifevalues.com). The user name and password is cova.

Your enclosed **2017 BENEFITS AT A GLANCE** and **Plan Option Summary flyers** can help you to review and compare all plan benefits so that you can make an informed coverage decision.

## Your Plan Amendment and Member Handbook:

The changes in your Annual Rate Notification Booklet are updates to your plan member handbook. Look for the 2017 amendment to your plan soon, mailed to your home address.

All current plan member handbooks and amendments are available on the Open Enrollment page on the DHRM website at [www.dhrm.virginia.gov/healthcoverage/open-enrollment](http://www.dhrm.virginia.gov/healthcoverage/open-enrollment).

### **ActiveHealth Management Health and Wellness Program**

During your enrollment in either COVA Care, COVA HealthAware, or the COVA HDHP, you will have access to [MyActiveHealth.com/COVA](http://MyActiveHealth.com/COVA). Registration at this web site provides tools and resources to assist participants in maintaining healthy lifestyles. Programs and coaching are available to assist participants in identifying and reaching their personal health goals.

ActiveHealth programs include:

- Disease management programs and incentives, including those that can provide certain drugs at no cost to the participant based on compliance with program requirements—and also help manage your chronic health condition (copayment/coinsurance incentives do not apply to the COVA HDHP). Programs include:
  - ✓ Diabetes Management
  - ✓ Asthma/COPD (chronic obstructive pulmonary disease) Management
  - ✓ Hypertension (high blood pressure) Management
- An opportunity to reduce your health plan premium (does not apply to COVA HDHP)
  - ✓ Premium rewards based on completion of the healthy action— complete or update and submit your online health assessment. See page 2 for more information
- For COVA HealthAware participants, opportunities to increase their Health Reimbursement Arrangement (HRA) contributions by completing healthy activities called “Do-Rights”
  - ✓ \$50 for one completed “Do-Right” up to \$150 each for an extended coverage/COBRA participant and enrolled spouse—contact Aetna/COVA HealthAware for more information (see page 6)
- Other Programs to help you improve and maintain your health (copayment/coinsurance/HRA incentives do not apply to the COVA HDHP):
  - ✓ **Healthy Beginnings** – help for expectant moms (copay waiver/HRA contribution based on completion of program requirements)
  - ✓ **Healthy Insights** – helps you manage chronic conditions (see disease management programs listed previously)
  - ✓ **Healthy Lifestyles** – tools and coaching to keep you on track for maintaining good health through good nutrition, exercise, stress management and quitting tobacco

**IMPORTANT!** You can opt out of the MyActiveHealth portal by contacting ActiveHealth, but you will not be eligible for any incentives, including premium rewards, for the period during which you are in an opt-out status. You may opt back into the portal as long as you remain eligible, but reinstatement takes several weeks. An individual opt-out (or opt-in) does not apply to any other covered adult under your membership.

### **Kaiser Permanente Health and Wellness Programs**

Kaiser Permanente offers health and wellness programs to its members. They include maternity support, health condition management, and healthier living resources. For more information, contact Kaiser at 800-777-7902 or 301-468-6000.

## ***Making Changes***

**Open Enrollment Changes** – If you wish to make a plan or membership change during Open Enrollment, your completed *Extended Coverage/COBRA Change Request* form must be mailed to the following address and postmarked no later than May 15, 2017: **Office of Health Benefits COBRA Administrator, 101 North 14<sup>th</sup> Street, 13<sup>th</sup> Floor, Richmond, VA 23219.**

Forms are available at the Department of Human Resources Management web site at [www.dhrm.virginia.gov](http://www.dhrm.virginia.gov) or by calling 1-888-642-4414.

There is no online enrollment available. You must complete an Extended Coverage/COBRA Change Request Form to facilitate any open enrollment change.

Once an election is made, it will not be changed except as allowed by the policies of the Department of Human Resource Management. After the Open Enrollment Period ends, you may not revise your Open Enrollment election because you changed your mind or you completed the form incorrectly.

If you are submitting an *Extended Coverage/COBRA Change Request* form to make an Open Enrollment change to be effective July 1, 2017, be sure to check the Open Enrollment box as the reason for making the change.

***Making Changes After Open Enrollment*** – After the Open Enrollment period, membership changes will only be allowed based on the occurrence of a consistent qualifying mid-year event (such as marriage or birth of a child). The change must be made within 60 days of the event. Any increase in membership level will require documentation to support the addition of new family members.

## ***Other News and Information***

### **If You Become Entitled to Medicare or Start Coverage Under Another Group Health Plan...-**

The Extended Coverage/COBRA provisions of the Public Health Service Act provide that continuation coverage will be terminated before the end of the maximum coverage period if a Qualified Beneficiary becomes covered under another group health plan or if a Qualified Beneficiary becomes entitled to Medicare benefits (under Part A, Part B or both) after electing continuation coverage. It is the obligation of the Qualified Beneficiary to notify the Office of Health Benefits (OHB) COBRA Administrator in writing within 30 days of the start of such coverage. Upon reporting these events, coverage will be terminated. Failure to report other coverage within the 30-day time limit will not preclude termination back to the date the coverage would have been terminated had it been reported on time.

**Prompt Payment of Premiums** – Extended Coverage premium payments are due on the first day of the coverage month; however, by law, participants are given a grace period of 30 days to make each periodic payment. If the premium payment is not received by the first day of the coverage month, coverage will be suspended and then retroactively reinstated when the premium is paid. This means that any claim you submit for benefits while your coverage is suspended may be denied, but it may be resubmitted once your coverage is reactivated upon receipt of payment. If you fail to make your premium payment by the end of the grace period, you will lose all rights to continuation coverage effective the first of the month for which payment was not received. Payments are considered made when mailed.

**Address Changes - Was this package forwarded to you from an old address?** If so, be sure to contact the Office of Health Benefits Extended Coverage/COBRA Administrator (see below) immediately to make an address correction, including an updated telephone number. If you have an e-mail address, you may ask to have it included in your eligibility record. Failure to update your mailing address can result in missing important information about your health benefits program. The Department of Human Resource Management will not be responsible for information that participants miss, including billing statements, because their address of record is incorrect. The Department's only means of communicating important information to Extended Coverage/COBRA qualified beneficiaries is through the mail. Please let your Benefits Administrator know when you move!

**If You Need Help...** - Extended Coverage/COBRA qualified beneficiaries should contact the Office of Health Benefits Extended Coverage/COBRA Administrator with questions regarding Open Enrollment or about

eligibility and administrative issues; however, questions regarding claims should be directed to the appropriate claims administrator (see page 6).

Office of Health Benefits Extended Coverage/COBRA Administrator  
 101 North 14<sup>th</sup> Street, 13<sup>th</sup> Floor  
 Richmond, VA 23219  
 888-642-4414

**Enclosures:**

*Summary of Benefits and Coverage* for your current plan  
 CHIP Notice  
 2017 – Benefits at a Glance  
 Your Health Plan Options booklet  
 Important Notices  
 Language Assistance Notice

**RESOURCES FOR PLANS AND OPTIONAL BENEFITS**

**Following is contact information, by plan and plan provision, which you may use to obtain additional information or assistance regarding plan options:**

|  |  |  |
|--|--|--|
| COVA Care and<br>COVA HDHP                 | <ul style="list-style-type: none"> <li>• Medical, Prescription Drug, Vision and Hearing</li> <li>• EAP and Behavioral Health (Anthem)</li> <li>• Dental (Delta Dental)</li> <li>• Total Population Health and Wellness (ActiveHealth Management)</li> </ul>                | <ul style="list-style-type: none"> <li>• 800-552-2682<br/><a href="http://www.anthem.com/cova">www.anthem.com/cova</a></li> <li>• 855-223-9277<br/><a href="http://www.anthemEAP.com">www.anthemEAP.com</a></li> <li>• 888-335-8296<br/><a href="http://www.deltadentalva.com">www.deltadentalva.com</a></li> <li>• 866-938-0349<br/><a href="http://www.myactivehealth.com/cova">www.myactivehealth.com/cova</a></li> </ul> |
| COVA<br>HealthAware<br>COVA<br>HealthAware | <ul style="list-style-type: none"> <li>• Medical, Dental, Prescription Drug and Behavioral Health (Aetna)</li> <li>• EAP (Aetna)</li> <li>• Total Population Health and Wellness (ActiveHealth Management)</li> <li>• Basic and Optional Routine Vision (Aetna)</li> </ul> | <ul style="list-style-type: none"> <li>• 855-414-1901<br/><a href="http://www.covahealthaware.com/cova">www.covahealthaware.com/cova</a></li> <li>• 888-238-6232</li> <li>• 866-938-0349<br/><a href="http://www.myactivehealth.com/cova">www.myactivehealth.com/cova</a></li> <li>• 855-414-1901</li> </ul>   |
| Kaiser<br>Permanente HMO                   | <ul style="list-style-type: none"> <li>• Medical, Prescription Drug and Vision (Kaiser)</li> <li>• Dental (Dominion Dental)</li> <li>• EAP (ValueOptions)</li> <li>• Behavioral Health</li> <li>• Online Doctor Video Chat</li> </ul>                                      | <ul style="list-style-type: none"> <li>• 800-777-7902<br/><a href="http://my.kaiserpermanente.org/mida/commonwealthofvirginia">http://my.kaiserpermanente.org/mida/commonwealthofvirginia</a></li> <li>• 888-518-5338</li> <li>• 866-517-7042</li> <li>• 866-530-8778</li> <li>• 703-359-7878</li> </ul>   |