

State Health Benefits Program Dependent Eligibility Audit Frequently Asked Questions

Q1. Why is the audit being done?

A1. When individuals who are not eligible use a state health plan, health care costs increase for those who are eligible for coverage. The State Health Benefits Program is doing this audit to make sure that plan enrollees are only paying for those who qualify for coverage. The audit will help us reduce program costs and monitor dependent information in the future.

Q2. Who will be audited?

A2. All employees with dependents on their state health plan must participate in the audit.

Q. How will I be notified?

A. You will be sent an audit packet to your home address which includes an initial notice of the audit, a chart of who is eligible, frequently asked questions and a Required Affidavit Signature Form to complete and return.

Q3. What do I need to do?

A3. Review carefully the information in your packet and follow the instructions on the Required Affidavit Signature Form to complete the audit.

Q4. Who do I call if I have questions about the audit?

A4. If you have questions, contact the Commonwealth of Virginia's Dependent Eligibility Verification Unit toll-free at 1-866-641-5651.

Q5. Will I be required to provide documentation of eligibility for my covered dependents?

A5. Documentation will not be requested for this part of the audit; however, the program reserves the right to audit individual files and require documentation to prove eligibility of dependents. You will be notified individually if documentation is required. In addition, these documents will be required when adding dependents.

Q6. What type of documents may be required?

A6. The *Eligibility Definitions* chart in your packet will show the documents that may be required. You will be notified individually if you need to provide documentation.

Q7. What do I do if one of my dependents is not listed on the Affidavit Signature Form?

A7. If a dependent is not listed, you should inform your agency Benefits Administrator. You will be required to provide documentation of the dependent's eligibility.

Q8. What happens if an individual listed on the Affidavit Signature Form is not eligible for coverage?

A8. Mark that individual as "Not Eligible" and complete and return the Affidavit as required. Coverage for you and your other eligible dependents will not be discontinued; however, claims for the ineligible dependent may be retracted.

Q9. What if I report an individual as eligible who is later determined to be ineligible?

A9. The Affidavit is a legal document and intentional certification of incorrect information constitutes perjury which may be referred to the Commonwealth's Attorney's office. In addition, an individual who enrolls an ineligible dependent may be excluded from participation from the plan for up to three years. Each case will be reviewed by the Office of Health Benefits and appropriate action taken depending on the circumstances.

Q10. What happens if I miss the deadline for returning the Affidavit Signature Form?

A10. If you fail to respond to the audit by the deadline, you risk losing coverage under the State Health Benefits Program for up to three years.

Q11. How will I know that my Required Affidavit Signature Form has been received?

A11. The Dependent Eligibility Verification Unit will send you a confirmation letter.

Q12. Once I complete the audit, what will happen to coverage for my eligible dependents?

A12. As long as the listed dependent(s) you declared eligible on the Required Affidavit Signature Form **are determined to be eligible**, they will continue to be covered on your state health plan with no lapse in coverage.