

Who to Contact for Help

Where can I get help if I have questions about my health plan's benefits or participating providers?

Many benefit questions will be answered in your Member Handbook, along with applicable inserts and/or amendments. All Enrollees should have a Member Handbook/inserts for their own plan, but non-participants may review handbooks at www.dhrm.virginia.gov/employeebenefits.html. However, if you need additional information, or if you need to identify or confirm a participating provider in a claim administrator's network, contact the Member Services telephone number on your ID card or visit the administrator's Web site. A list of health benefits claim administrators is attached for your use (see page 5). Your claims administrator will also be able to replace a Member Handbook.

If you are in a Medicare-coordinating plan (Advantage 65, Option I or Option II), Medicare is your primary medical coverage. Contact Medicare (see below) for additional information about benefits, primary claim payments or providers who accept assignment.

Where can I get information about Medicare?

If you have questions about Medicare, visit your local Social Security office, call 1-800-MEDICARE, or visit the Medicare Web site at www.medicare.gov. In Virginia, you may also call the Department for the Aging at 1-800-552-3402 or visit the Web site at www.vda.virginia.gov. Employees who are preparing to retire and who will be eligible for Medicare at the time of retirement should contact the Social Security Administration (1-800-772-1213) at least three months prior to retirement to ensure that Medicare is aware of their change in employment status and that Medicare will be in place on their retirement date. This also applies to Medicare-eligible dependents who will be covered based on their retiree coverage.

Medicare is the primary payer of Medicare Part A and Part B covered services for Medicare-eligible participants in the retiree group (with limited exceptions). If you have questions about your Medicare primary claim payment, you must contact your Medicare claims administrator (see your Medicare Summary Notice). Questions regarding secondary claim payments under your state plan, or benefits not covered by Medicare but covered under your state plan (e.g., routine

dental or vision benefits), may be addressed by the appropriate claims administrator (see page 5). If Medicare is refusing primary payment after retirement, contact the Medicare Coordination of Benefits (COB) contractor at 1-800-999-1118 to update your employment status.

You may obtain information about Medicare Part D (prescription drug) plans that are **not** associated with the state program by calling 1-800-MEDICARE or going to www.medicare.gov. Participants enrolled in Advantage 65, Advantage 65 + Dental/Vision, Option I, Option II and Option II + Dental/Vision (but NOT those enrolled in Advantage 65—Medical Only or Advantage 65—Medical Only + Dental/Vision) are automatically submitted for enrollment in Medicare Part D as a part of these plans. However, **coverage is contingent upon approval by Medicare.**

Additional Retiree Fact Sheets are available which include information regarding ***Medicare and the State Retiree Health Benefits Program*** and ***Prescription Drugs – Medicare-Eligible Participants***.

Who should I call if I have questions about a claim submitted under the state program?

Contact the appropriate health plan claims administrator listed on page 5.

How do I request/replace a health plan ID card?

Contact the appropriate claims administrator listed on page 5. However, if you need to make an address change so that your card is mailed to the correct location, contact your Benefits Administrator (see below).

Who can help me with eligibility questions?

Your Member Handbook addresses information about eligibility, enrollment and allowable changes. Retiree Fact Sheets # 2 (***Eligibility, Enrollment and Plan Choices***) and #4 (***Making Changes***) are also excellent resources. However, if you have additional questions, contact your Benefits Administrator. Your Benefits Administrator is also the correct recipient of enrollment forms to request allowable changes and to change your address of record. Please see the following chart to determine your Benefits Administrator.

If You Are:	Your Benefits Administrator is:
<ul style="list-style-type: none"> • A Retiring Employee • An Employee starting Long Term Disability (LTD) • A new Survivor of an active employee 	Your current/active employing agency's Benefits Administrator
<ul style="list-style-type: none"> • A Current VRS Retiree • A Current VRS Survivor • A Current VSDP Long Term Disability (LTD) Participant 	Virginia Retirement System (VRS) (888)-827-3847 P.O. Box 2500 Richmond, VA 23218-2500 www.varetire.org
<ul style="list-style-type: none"> • A Non-Annuitant Survivor* <p>*Survivors of employees or retirees who are not receiving a VRS benefit</p>	Department of Human Resource Management (DHRM) (888) 642-4414 101 N. 14 th Street, 13 th Floor Richmond, VA 23219 www.dhrm.virginia.gov
<ul style="list-style-type: none"> • All Other Retirees (e.g., Optional Retirement Plan Retirees, Local Retirees) 	Your Pre-Retirement/LTD Agency Benefits Administrator

Who should I contact with questions about payment of premiums or the Health Insurance Credit?

Monthly premiums are collected as follows:

- If you receive a VRS monthly retirement benefit that can support your premium obligation, your premiums will be deducted from your benefit. If you are entitled to a Health Insurance Credit, you will also receive the appropriate credit added to your monthly VRS benefit.
- If you do not receive a VRS monthly benefit or if that benefit is not sufficient to cover your premium, you will be billed directly by the designated billing administrator for your plan. Direct-bill participants in COVA Care Plans will be billed by Anthem Blue Cross and Blue Shield and may have their premium automatically deducted from their bank account or pay electronically. Contact Anthem for more information. Direct-bill COVA Connect participants receive

monthly invoices from FBMC and should pay according to information on their bill. Direct-bill Kaiser participants will be billed by Kaiser.

- If you are entitled to a Health Insurance Credit, you will receive it in your monthly VRS retirement benefit even if you pay your premium directly to your claims administrator. If you do not receive a VRS retirement benefit, your credit will be mailed directly to your address of record.
- All long-term disability (LTD) participants will be billed directly by their plan's billing administrator (see above) for their monthly premium. VSDP LTD participants who are enrolled in the State Retiree Health Benefits Program will be automatically set up for the Health Insurance Credit reimbursement, which will be included in the LTD benefit paid by Unum Provident. However, LTD participants who are enrolled as dependents under the state program must submit a Health Insurance Credit form in order to receive the appropriate credit.
- If you are eligible for the Medicare Part D Low Income Subsidy, your subsidized premium will be billed directly by Anthem Blue Cross and Blue Shield. In this case, you have the option of automatic deduction from your bank account or electronic payment. Contact Anthem for more information.

If your premium is deducted from your VRS retirement benefit, contact VRS with questions about your premium deduction. If you are billed directly by Anthem, FBMC or Kaiser, contact the customer service number listed on your monthly invoice if you have any premium billing questions.

The Virginia Retirement System administers the Health Insurance Credit Program and should be contacted with any questions regarding that benefit. VRS also offers a helpful "Frequently Asked Questions" regarding the program, which is available on the VRS Web site at www.varetire.org.

I am not enrolled in the State Retiree Health Benefits Program, but I am entitled to the Health Insurance Credit. How will I receive my credit?

- If you are eligible for the Health Insurance Credit and enrolled in a health plan outside of the State Retiree Health Benefits Program, you may apply for reimbursement of the Health Insurance Credit by submitting a **Request for Health Insurance Credit Form** (VRS-45) to VRS.
- If you are receiving a monthly VRS benefit, your Health Insurance Credit reimbursement will be added to your monthly benefit deposit. If not, it will be mailed directly to your address of record.

If you need additional information regarding the Health Insurance Credit Program, go to the Virginia Retirement System (VRS) Web site at www.varetire.org.

I am enrolled in the Tricare Supplement Plan. Who can I contact for assistance?

The Tricare Supplement is administered by ASI, which can be reached at 800-638-2610. Contact ASI regarding your Tricare supplemental benefits or to make an allowable change under that plan. Retiree Fact Sheet #2, **Eligibility, Enrollment and Plan Choices**, includes information about electing and leaving the Tricare Supplement Plan. If you need information about the state program, contact your Benefits Administrator (see page 3).

*State Retiree Health Benefits Program
Health Benefits Plan Administrators/Contacts*

Non-Medicare Plans

<i>Benefit</i>	<i>Administrator</i>	<i>Telephone No./Web Site</i>
COVA Care – Medical, Vision or Hearing	Anthem Blue Cross and Blue Shield	(804)355-8506 - Richmond (800)552-2682 - Outside of Richmond) www.anthem.com/cova
COVA Care or COVA Connect – Dental	Delta Dental Plan of Virginia	(888)335-8296 www.deltadentalva.com
COVA Care - Behavioral Health	ValueOptions, Inc.	(866)725-0602 www.achievesolutions.net/covacare
COVA Care - Prescription Drugs	Medco Health Solutions, Inc.	(800)355-8279 www.medcohealth.com
Regional Plan Benefits	Kaiser Permanente HMO	(800)777-7902 http://my.kaiserpermanente.org/mida/commonwealthofvirginia/
COVA HDHP - Medical, Dental, Behavioral Health and Prescription Drugs	Anthem Blue Cross and Blue Shield	(804)355-8506 - Richmond (800)552-2682 - Outside of Richmond) www.anthem.com/cova
COVA Care HDHP - Behavioral Health	Anthem Blue Cross and Blue Shield	(800)991-6045
COVA Care HDHP – Employee Assistance Program (EAP)	Anthem Blue Cross and Blue Shield	(800)346-5484
COVA Connect – Medical, Vision, Hearing, Behavioral Health, EAP and Prescription Drugs	Optima Health	(757)687-6350 (866)846-2682 www.optimahealth.com/cova

Medicare-Coordinating Plans

<i>Benefit</i>	<i>Administrator</i>	<i>Contact Information</i>
Advantage 65, Option I, Option II and Advantage 65-Medical Only – Secondary Medical Benefit (including mental health)*	Anthem Blue Cross and Blue Shield	(804)355-8506 - Richmond (800)552-2682 - Outside of Richmond) www.anthem.com/cova
Advantage 65, Option I and Option II – Prescription Drug Benefit	Medco Health Solutions, Inc.	(800)572-4098 www.medcohealth.com
Advantage 65 with Dental and Vision, Option I, Option II with Dental and Vision and Advantage 65-Medical Only with Dental and Vision – Dental Benefit	Delta Dental Plan of Virginia	(888)335-8296 www.deltadentalva.com
Advantage 65 with Dental and Vision, Option I, Option II with Dental and Vision and Advantage 65-Medical Only with Dental and Vision – Vision Benefit	Anthem Blue Cross and Blue Shield – Blue View Vision	(804)355-8506 - Richmond (800)552-2682 - Outside of Richmond) www.anthem.com/cova

***Note: Primary hospital and medical coverage for the state’s Medicare-eligible retiree group participants is adjudicated by Medicare**