



COMMONWEALTH OF VIRGINIA

DEPARTMENT OF HUMAN RESOURCE MANAGEMENT

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

From: Office of State and Local Health Benefits Programs

Date: May 2, 2019

Subject: ANNUAL OPEN ENROLLMENT THROUGH MAY 15

Your Annual Open Enrollment

Your annual Open Enrollment opportunity will be available through May 15. During this time, you can make changes to your Extended Coverage/COBRA health plan and membership level if you continue to be eligible for coverage (changes must comply with eligibility criteria). Open Enrollment changes will be effective July 1, 2019, the start of the new plan year. This booklet includes information about coverage options and changes to existing plans for the new plan year. Enclosed are resources to help you make the best coverage decision for your individual needs, including:

- 2019 Benefits-At-A-Glance, an overview of benefit coverage for each plan
- Brochure describing highlights of available plans

PLEASE NOTE: PREMIUMS AND PLAN BENEFITS MAY CHANGE SUBJECT TO FINAL STATE BUDGET APPROVAL.

Your Premium for the New Plan Year

Monthly premiums for the new plan year are provided on page two based on your Extended Coverage/COBRA eligibility period. In some plans, you may reduce your premium by fulfilling the requirement to earn a Premium Reward.

Earning a Premium Reward:

If you are enrolled in either a COVA Care or COVA HealthAware Plan during the new plan year, you can reduce your monthly premium by completing an online health assessment. Your monthly premium cost will be reduced by \$17 per month when the requirement is met by the enrollee, and \$34 per month if the requirement is also met by an enrolled spouse.

To earn a reward BEGINNING July 1, 2019:

- Eligible participants must complete/update and submit their online health assessment between May 1—15 to earn a reward starting July 1. If this requirement is not completed, any existing premium reward will end on June 30, 2019.
- Go to www.myactivehealth.com/cova or call 866-938-0349 to complete/update your health assessment. *Remember, health assessments completed earlier than May 1, 2019, will not earn a reward for the new plan year.*

To earn a reward AFTER July 1, 2019:

- Eligible participants can complete and submit the health assessment by the 15th of any month to start receiving the premium reward in six to eight weeks.
- Health assessments completed between May 16 and June 30 should be submitted to ActiveHealth at www.myactivehealth.com/cova or by calling 866-938-0349.
- Health assessments completed after June 30, 2019, should be submitted to your health plan. Visit the COVA Care or COVA HealthAware web site to access your online health assessment (see *Resources* on page 8).

Your Monthly Premiums Starting July 1, 2019

The following chart includes your plan choices* and associated premiums for the new plan year. The shaded premiums are eligible for reduction by earning a Premium Reward as explained above.

18 or 36-Monthly Extended Coverage/COBRA Participants

	Single	Two-Person	Family
COVA Care (with preventive dental)	\$795	\$1,469	\$2,131
COVA Care + Out-of-Network	\$813	\$1,502	\$2,181
COVA Care + Expanded Dental	\$828	\$1,531	\$2,222
COVA Care + Out-of-Network + Expanded Dental	\$847	\$1,565	\$2,272
COVA Care + Expanded Dental + Vision and Hearing	\$848	\$1,567	\$2,274
COVA Care + Out-of-Network + Expanded Dental + Vision & Hearing	\$866	\$1,600	\$2,324
COVA HealthAware (with preventive dental)	\$708	\$1,313	\$1,898
COVA HealthAware + Expanded Dental	\$740	\$1,371	\$1,984
COVA HealthAware + Expanded Dental & Vision	\$751	\$1,392	\$2,013
COVA HDHP (with preventive dental)	\$596	\$1,108	\$1,619
COVA HDHP + Expanded Dental	\$628	\$1,168	\$1,706
Kaiser Permanente HMO*	\$672	\$1,236	\$1,801
<i>New-see page 4!</i> Optima Health Vantage HMO*	\$775	\$1,435	\$2,079

29-Month (11-Month Disability Extension) Extended Coverage/COBRA Participants

	Single	Two-Person	Family
COVA Care (with preventive dental)	\$1,169	\$2,160	\$3,134
COVA Care + Out-of-Network	\$1,196	\$2,210	\$3,207
COVA Care + Expanded Dental	\$1,218	\$2,252	\$3,267
COVA Care + Out-of-Network + Expanded Dental	\$1,245	\$2,301	\$3,341
COVA Care + Expanded Dental + Vision and Hearing	\$1,247	\$2,304	\$3,344
COVA Care + Out-of-Network + Expanded Dental + Vision & Hearing	\$1,274	\$2,354	\$3,417
COVA HealthAware (with preventive dental)	\$1,041	\$1,931	\$2,792
COVA HealthAware + Expanded Dental	\$1,088	\$2,016	\$2,918
COVA HealthAware + Expanded Dental & Vision	\$1,104	\$2,048	\$2,961
COVA HDHP (with preventive dental)	\$876	\$1,629	\$2,381
COVA HDHP + Expanded Dental	\$924	\$1,718	\$2,510
Kaiser Permanente HMO*	\$989	\$1,818	\$2,649
Optima Health Vantage HMO*	\$1,140	\$2,111	\$3,057

*Kaiser Permanente HMO and Optima Health Vantage HMO are only available to participants living in the plans' defined services areas. If you enroll in one of these plans but do not live in the service area, you will be required to change plans. Contact Kaiser or Optima directly for specific information—see *Resources* on page 8.

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
Optima Health Vantage HMO	Optima

Plan Information for July 1

New Regional Plan Available in Hampton Roads Area!

Optima Health Vantage HMO will be available starting July 1 to non-Medicare retiree group participants who live in the plan's service area. (Go to the Optima Health web site for the list of zip codes that define Optima's service area.) Optima Health provides both comprehensive coverage and access to a quality network of doctors, specialists, and hospitals in the Hampton Roads area. The Optima Health Plan is a "no-referral" HMO plan, but you can choose a primary care physician to coordinate your healthcare needs. Keep in mind that, as an HMO, the plan does not include out-of-network coverage except in emergencies; however, there is out-of-area coverage for dependent children.

Plan Highlights:

- Comprehensive benefits including dental, vision, hearing, and Employee Assistance Program (EAP)
- Preventive care covered at 100%
- 100% of hospitals in Hamptons Roads are in-network as of Jan. 1, 2019
- Freedom to see a plan specialist with no referral required
- Access to a 24/7/365 MDLive online physician, covered at 100%
- Incentives available for participation in disease management programs
- Low copayments on doctor and specialist visits when you use a Sentara Quality Care Network (SQCN) provider (see Benefits-At-A-Glance Tier 1 copayment level)
- Low annual deductibles: \$150 for individual and \$300 for family
- Access to a dedicated Member Services unit to help you understand benefits, find the right doctor, and more

To learn more:

- **Visit:** optimahealth.com/cova
- **Call:** 866-846-2682
- **Email:** members@optimahealth.com
- **Web Chat:** optimahealth.com/cova (click on Web Chat starting July 1)

July 1 Changes Under Existing Plans

COVA Care, COVA HDHP and COVA HealthAware Outpatient Prescription Drug Benefits

The outpatient prescription drug benefit under these plans will be administered by Anthem Pharmacy and delivered by IngenioRx. This includes retail, home delivery, and specialty pharmacy. Pharmacy customer service will be available 24/7/365 to assist you with any pharmacy plan questions. See *Resources* on page 8 for contact information. Present your new July 1 ID card for prescriptions at retail pharmacies after June 30.

Information will be sent separately regarding transition of existing authorizations, home delivery, and specialty pharmacy prescriptions. Take advantage of new online and mobile tools to help you manage your medications.

You will also be able to organize your prescription refills through *Medication Synchronization*, a voluntary program that lets you work with your pharmacy to synchronize your maintenance prescription refills each plan year so that all are available at the same time. If you receive a partial supply in order to “sync up” your prescriptions, its cost will be prorated to ensure that you do not pay the full cost for a partial supply.

COVA Care, COVA HDHP and COVA HealthAware Dental Benefits

Delta Dental will administer dental benefits for these plans. This is a change for COVA HealthAware but does not affect COVA Care or COVA HDHP. COVA HealthAware participants should present their new July 1 ID card for dental services after June 30.

As a reminder, the basic plans continue to include diagnostic and preventive services. If you wish to have coverage for primary and major dental services, you must choose the Expanded Dental optional benefit. This coverage will include such services as fillings, simple extractions, root canals, crowns, implants and orthodontia.

COVA HealthAware Health Reimbursement Arrangement (HRA) Administration

- Starting July 1, the COVA HealthAware HRA will be administered by Payflex through a Payflex Mastercard. Present your card at your participating retail pharmacy or to the home delivery pharmacy to utilize available HRA funds for covered medications. You should also provide your Mastercard information to pay other medical bills, just as you do with any credit/debit card. Remember that you are not obligated to pay a medical bill from a participating provider until the claims administrator processes your claim and indicates your out-of-pocket cost. However, if you pay any eligible expense out of your pocket, you can reimburse yourself by using the Payflex website or app. If you are enrolled in the COVA HealthAware Plan, look for your Payflex Mastercard for use after June 30.

Kaiser Permanente HMO

The Kaiser plan has made changes to its dental, prescription drug, and vision benefits.

Dental:

- Participants will pay coinsurance for dental benefits rather than a flat fee
- There will be a \$75 family deductible
- Dependents, age 19 years and under, will pay 50% of the cost up to \$1,000 for orthodontia

Prescription Drugs:

- For specialty drugs, participants pay 50% of the cost up to a \$75 maximum

Vision:

- Adults, age 19 years and older, will pay 75% of the balance for eyeglass frames
- Children will have a special list of contact lenses and frames available to them and can select:
 - One pair of glasses per year with single or bifocal lenses, or
 - The first purchase of contact lenses per year, or
 - Two per eye per year for medically necessary contacts.

Contact Kaiser for more information—see *Resources* on page 8.

Customer Service

COVA Care and COVA HDHP

- Your customer service experience will be enhanced through new Anthem Health Guides who are specially trained to answer your questions and lead you to the right programs and support for your unique needs. The new Engage mobile app is available for your smartphone or tablet and can help you keep your medical records in one place.

COVA HealthAware

- COVA HealthAware continues to provide concierge member services and offers a new Aetna Health app that provides 24/7 secure access to your member information, tools to help you estimate health care costs, and much more.

Health and Wellness Programs

COVA Care, COVA HDHP and COVA HealthAware Health and Wellness Programs

- Starting July 1, Disease Management programs for these plans will be administered by the medical plan claims administrator. Disease Management programs provide support to help manage chronic conditions such as asthma, heart failure, diabetes, chronic obstructive pulmonary disease (COPD) and coronary artery disease. Contact your health plan (see *Resources* on page 8) or review the enclosed plan highlights brochure for more information.

COVA Care and COVA HealthAware Incentive Programs

- Participants in these plans can receive certain medications or supplies at no cost to treat the following conditions: asthma, chronic obstructive pulmonary disease (COPD), diabetes and high blood pressure. Medication compliance and quarterly health coaching are required. Contact your health plan (see *Resources* on page 8), or review the enclosed plan highlights brochure for more information.
- Moms-to-be have access to a nurse coach and other support to help maintain a healthy pregnancy. Enrollment within the first 16 weeks of pregnancy and participation with a nurse coach can result in waiver of the hospital copayment or a \$300 contribution to your Health Reimbursement Arrangement (HRA), depending on your plan.

Making Open Enrollment Changes

To make a plan or membership change during Open Enrollment, you must complete an *Extended Coverage/COBRA Change Request* form. The completed form must be mailed to the following address and postmarked no later than May 15, 2019:

**Office of Health Benefits COBRA Administrator
101 North 14th Street, 13th Floor
Richmond, VA 23219**

Forms are available at the Department of Human Resources Management web site at **www.dhrm.virginia.gov** or by calling 1-888-642-4414.

You must complete an Extended Coverage/COBRA Change Request Form to facilitate any open enrollment change. Online enrollment is not available.

Once an election is made, it will not be changed except as allowed under the policies of the Department of Human Resource Management and applicable law. 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, 2019, 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...

ID Cards –You will receive ID cards for the new plan year starting on July 1. When you receive your new cards, you can destroy your old cards. Present your new ID cards to your health care providers for any claims after June 30.

NOTE: Current COVA Care and COVA HDHP participants will receive a new ID card in April to use through June 30. Using this interim card will help to test the new IngenioRx format. When you get your new cards for July, these interim cards can be destroyed.

Summaries of Benefits and Coverage (SBC) – If you would like an SBC for your current or another plan, they are available online at the following link, or you may request them from your Benefits Administrator (see Page 7).

<http://www.dhrm.virginia.gov/healthcoverage/summaryofbenefitsandcoverage>

IMPORTANT! 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.

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 at:

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

Questions regarding claims should be directed to your plan's customer service contact (see page 8).

Enclosures:

- **Plan Brochure**
- **2019 Benefits-At-A-Glance**
- **Important Notices Summary**
- **CHIP Notice**
- **Language Assistance Notice**

RESOURCES

Plan	Benefit	Contact Information
COVA Care and COVA HDHP	<ul style="list-style-type: none"> • Medical, Vision & Hearing (Anthem BCBS) • Behavioral Health Benefits & EAP (Anthem) • Dental (Delta Dental) • Prescription Drug (Anthem Pharmacy) 	<ul style="list-style-type: none"> • 800-552-2682 <u>www.anthem.com/cova</u> • 855-223-9277 <u>www.anthemEAP.com</u> • 888-335-8296 <u>www.deltadentalva.com</u> • 833-267-3108 <u>www.anthem.com</u>
COVA HealthAware	<ul style="list-style-type: none"> • Medical, Vision, Hearing and Behavioral Health (Aetna) • EAP (Aetna) • Prescription Drug (Anthem Pharmacy) • Dental (Delta Dental) 	<ul style="list-style-type: none"> • 855-414-1901 <u>www.covahealthaware.com</u> • 888-238-6232 <u>www.mylifevalues.com</u> (Password: COVA) • 833-267-3108 <u>www.anthem.com</u> • 888-335-8296 <u>www.deltadentalva.com</u>
Kaiser Permanente HMO	<ul style="list-style-type: none"> • Medical, Prescription Drug and Vision (Kaiser) • Dental (Dominion National) • EAP (Beacon Health Options) • Behavioral Health (Kaiser) 	<ul style="list-style-type: none"> • 800-777-7902; 301-468-6000 in Washington, D.C. <u>https://my.kp.org/commonwealthofvirginia/</u> • 855-733-7524 <u>http://www.DominionNational.com/kaiser</u> • 866-517-7042 <u>www.achievesolutions.net/kaiser</u> • 866-530-8778
Optima Health Vantage HMO	<ul style="list-style-type: none"> • Medical, Prescription Drug, Dental, Vision, Behavioral Health • Employee Assistance Program (EAP) 	<ul style="list-style-type: none"> • 866-846-2682 <u>www.optimahealth.com/cova</u> or <u>members@optimahealth.com</u> • <u>https://login.optimahealth.com/?s_username=Co va</u>