

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: April 18, 2022

Subject: ANNUAL OPEN ENROLLMENT May 2 – 16, 2022

Your Annual Open Enrollment

Your Open Enrollment will take place from May 2 through May 16. 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, 2022, the start of the new plan year. This booklet includes information about coverage options and changes to existing plans for the new plan year. The 2022 **Benefits-At-A-Glance** provides an overview of benefit coverage for each plan.

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 4 based on your Extended Coverage/COBRA eligibility period.

Earning a Premium Reward:

If you are enrolled in either COVA Care or COVA HealthAware Plan during the new plan year, you can reduce your monthly premium by completing a 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.

COVA CARE PLAN:

Here are links to access your COVA Care Health Assessment Navigation Guide for the <u>Sydney</u> <u>Health Mobile App</u> and the <u>Anthem Member Website</u>.

- Log in to <u>www.anthem.com</u>
- Select *My Health Dashboard* from the top navigation menu
- Select Programs
- Scroll down to locate the WebMD Health Risk Assessment tile, then click "learn more"
- Click "Start your assessment" If you have previously completed an assessment, you will see your last score, and a "take it again" button. Click the "take it again" button to begin updating your assessment.
- Click on the "save and finalize" button when you have completed your assessment
- After completing your assessment, you will be asked three questions about Healthy Changes. Click "save and continue" after answering these questions
- One final Feedback question will be asked, then you will click "finish"
- Your new health risk score will appear. Be sure to print your confirmation page, or save a screenshot for your records

You may also access the Health Assessment through the Sydney Health app on your mobile device:

- Log in to the Sydney Health app
- From the Sydney Welcome screen, you can click on the "More" button, in the bottom right corner
- Choose "My Health Dashboard" from the menu list
- Scroll down to the "Featured Programs section", then click "View All"
- Scroll down and click on the WebMD Health Risk Assessment tile
- Click "Start your assessment" If you have previously completed an assessment, you will see your last score, and a "take it again" button. Click the "take it again" button to begin updating your assessment.
- Click on the "save and finalize" button when you have completed your assessment and then "finish"
- After completing your assessment, you will be asked three questions about Healthy Changes. Click "save and continue" after answering these questions
- One final Feedback question will be asked, then you will click "finish"
- Your new health risk score will appear. Be sure to print your confirmation page, or save a screenshot for your records

For COVA Care members with literacy, language, or technological challenges, you may contact Anthem at 1-800-552-2682 for help.

COVA HealthAware PLAN:

Here is a link to your <u>Aetna Health Digital Reference Guide</u>.

Accessing from a browser (pages 23-25 of the Aetna Health Digital Reference Guide):

- Log in to your Aetna Member Website on <u>www.aetna.com</u>
- Scroll down until you see "Member Resources" on the right side of the page and click on "Well-being Resources" in this section to open your Member Engagement Platform
- Once the Member Engagement Platform opens, hover over "My Health" in the menu at the top and then click on "Health Assessment"

Accessing from the Aetna Health mobile app (page 37 of the Aetna Health Digital Reference Guide):

- Log in to the Aetna Health mobile app
- Select the Improve tab
 - When accessing this tab for the first time, select Get Started
 - When accessing this tab after the first time, select Health Survey

Your Monthly Premiums Starting July 1, 2022

Two-

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

	Two-		
	Single	Person	Family
COVA Care (with preventive dental)	\$835	\$1544	\$2240
COVA Care + Out-of-Network	\$854	\$1579	\$2293
COVA Care + Expanded Dental	\$871	\$1610	\$2336
COVA Care + Out-of-Network + Expanded Dental	\$890	\$1645	\$2389
COVA Care + Expanded Dental + Vision and Hearing	\$891	\$1647	\$2391
COVA Care + Out-of-Network + Expanded Dental + Vision			
& Hearing	\$910	\$1683	\$2443
COVA HealthAware (with preventive dental)	\$740	\$1372	\$1985
COVA HealthAware + Expanded Dental	\$774	\$1434	\$2074
COVA HealthAware + Expanded Dental & Vision	\$785	\$1456	\$2106
COVA HDHP (with preventive dental)	\$626	\$1165	\$1703
COVA HDHP + Expanded Dental	\$660	\$1229	\$1796
Kaiser Permanente HMO*	\$767	\$1409	\$2054
Optima Health Vantage HMO*	\$797	\$1475	\$2136

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

	Two-		
	Single	Person	Family
COVA Care (with preventive dental)	\$1228	\$2271	\$3295
COVA Care + Out-of-Network	\$1257	\$2323	\$3373
COVA Care + Expanded Dental	\$1281	\$2368	\$3436
COVA Care + Out-of-Network + Expanded Dental	\$1309	\$2419	\$3514
COVA Care + Expanded Dental + Vision and Hearing	\$1311	\$2422	\$3517
COVA Care + Out-of-Network + Expanded Dental + Vision	\$1339	\$2475	\$3594
& Hearing			
COVA HealthAware (with preventive dental)	\$1089	\$2019	\$2920
COVA HealthAware + Expanded Dental	\$1138	\$2109	\$3051
COVA HealthAware + Expanded Dental & Vision	\$1155	\$2142	\$3097
COVA HDHP (with preventive dental)	\$921	\$1714	\$2505
COVA HDHP + Expanded Dental	\$972	\$1807	\$2641
Kaiser Permanente HMO*	\$1128	\$2073	\$3021
Optima Health Vantage HMO*	\$1173	\$2170	\$3142

*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:

If your plan is:	You will be billed by:
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

Benefit Changes for July 1

COVA Care and COVA HDHP

Starting on July 1, coverage for continuous glucose monitors (CGMs) will be available **ONLY under the IngenioRx pharmacy benefit**. COVA Care and COVA HDHP members will be able to fill a CGM prescription at any participating pharmacy in the plan's network or have CGM supplies delivered to their home through IngenioRx Home Delivery. After July 1, **members will need to request a new prescription for CGM supplies from their doctor** and send it to their pharmacy.

For all other health plans, CGMs will continue to be covered under both the pharmacy and durable medical equipment (DME) medical benefit.

COVA Care, COVA HDHP and COVA HealthAware

The *Healthy Smile Healthy You* program will offer an additional cleaning and exam beyond the annual limit for patients with cancer, a weakened immune system, kidney disease or undergoing kidney dialysis.

Health and Wellness Programs

Preventive Screenings Could Save Your Life

Early detection of health issues can help keep treatment costs down and can increase the likelihood of positive health outcomes. Regular preventive care is included in your health benefits. Making time for it is one of the best ways you can make sure you and your family are at your healthy best.

The Commonwealth's plans offer annual adult and well-child exams, gynecological exams, vaccinations, and cancer screenings at no cost to you. To find out what screenings and vaccines are recommended, consult your plan Member Handbook or Evidence of Coverage, call your health plan or visit the plan website. Contact information is on page 8. Your doctor may suggest additional screenings or vaccinations based on various factors such as your age and health history.

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

Disease Management programs provide support to help manage chronic conditions such as asthma, heart disease, diabetes, chronic obstructive pulmonary disease (COPD), coronary artery disease and hypertension. These programs are administered by the medical plan claims administrator. Contact your health plan (see *Resources* on page 8).

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).
- Enrolled members have access to a nurse coach and other maternity support specially designed to help make good choices throughout the pregnancy and to help you have a safe delivery and a healthy child. 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.
- Plan participants have access to a weight management coach who will provide one-onone goal-oriented support for weight management and nutrition counseling as well as personalized coaching and disease management. You are required to participate in your plan's 12-month weight management coaching and education program. Contact your health plan (see *Resources* on page 8).

You may also find information on similar programs for Kaiser Permanente and Optima Health Vantage HMO on their respective websites.

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 16, 2022:

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 website 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, 2022, 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/life 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...

<u>IMPORTANT! If You Become Entitled to Medicare or Start Coverage Under Another</u> <u>Group Health Plan</u>

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.

<u>Address Changes</u> - 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).

RESOURCES

Plan	Benefit	Contact Information
	Medical, Vision & Hearing (Anthem BCBS)	• 800-552-2682 www.anthem.com/cova
COVA Care and COVA HDHP	Behavioral Health Benefits & EAP (Anthem)	 855-223-9277 www.anthemEAP.com
	Dental (Delta Dental)	 888-335-8296 www.deltadentalva.com
	 Prescription Drug (Anthem Pharmacy) 	• 833-267-3108 <u>www.anthem.com</u>
COVA HealthAware	Medical, Vision, Hearing and Behavioral Health (Aetna)	855-414-1901 <u>www.covahealthaware.com</u>
	 EAP (Aetna) 	 888-238-6232 www.mylifevalues.com (Password: COVA)
	 Prescription Drug (Anthem Pharmacy) 	 833-267-3108 <u>www.anthem.com</u>
	Dental (Delta Dental)	 888-335-8296 www.deltadentalva.com
	Teladoc Virtual Visit	• <u>www.teladoc.com/aetna</u>
Kaiser Permanente HMO	 Medical, Prescription Drug and Vision (Kaiser) 	800-777-7902; 301-468-6000 in Washington, D.C. <u>https://my.kp.org/commonwealthofvirginia/</u>
	Dental (Dominion National)	 855-733-7524 <u>http://www.DominionNational.com/kaiser</u>
	 EAP (Beacon Health Options) 	 866-517-7042 www.achievesolutions.net/kaiser
	 Behavioral Health (Kaiser) 	• 866-530-8778
Optima Health Vantage HMO	 Medical, Prescription Drug, Dental, Vision, Behavioral Health 	 866-846-2682 www.optimahealth.com/cova or members@optimahealth.com
	 Employee Assistance Program (EAP) 	 <u>https://login.optimaeap.com</u> (Username:Cova)

Enclosures:

- Summary of Benefits and Coverage for your current plan
- 2022 Benefits-At-A-Glance
- Important Notices SummaryCHIP Notice
- Balance Billing Notice