Planning for Retirement

Commonwealth of Virginia
State Retiree Health Benefits Program

If you are eligible and decide to enroll in the State Retiree Health Benefits Program at the time of retirement, you are required to choose a plan based upon whether you are or are not eligible for Medicare.

### Non-Medicare Plans
Plan Choices for Retirees and Family Members Not Eligible for Medicare

**Plans Available to All Non-Medicare Participants**
- COVA Care with Preventive Dental
- COVA Care with Out-of-Network
- COVA Care with Expanded Dental
- COVA Care with Out-of-Network and Expanded Dental
- COVA Care with Vision, Hearing and Expanded Dental
- COVA Care with Out-of-Network, Vision, Hearing and Expanded Dental
- COVA HealthAware with Preventive Dental
- COVA HealthAware with Expanded Dental
- COVA HealthAware with Expanded Dental and Vision
- COVA HDHP (High Deductible Health Plan) with Preventive Dental
- COVA HDHP with Expanded Dental

**Regional Plan**
- Kaiser Permanente HMO: Designated service area only

Contact Kaiser for specific cities and counties covered in their service area.

**A TRICARE supplement** is also available to non-Medicare-eligible retiree group participants who are eligible for TRICARE. Consult your Benefits Administrator for additional information.

### Medicare-Coordinating Plans
Plan Choices for Retirees and Family Members Eligible for Medicare

**Plans offered by the State Retiree Health Benefits Program**
You may choose one of these plans:
- Advantage 65
- Advantage 65 + Dental/Vision
- Advantage 65 – Medical Only
- Advantage 65 – Medical Only + Dental/Vision
**What are Medicare-Coordinating Plans?** They are supplemental plans designed to pay secondary to Medicare. In order to receive supplemental benefits, you must enroll in Original Medicare (Parts A and B).

Retirees or covered family members in the retiree group will be enrolled automatically in Advantage 65 + Dental/Vision upon becoming eligible for Medicare due to age unless another election is made; an enrollment form is required only to make a different election.

If you or a covered family member becomes eligible for Medicare **before age 65**, you must complete an Enrollment Form to select a Medicare-coordinating plan immediately upon Medicare eligibility.

The following plans are **only available to existing enrollees already enrolled in these plans**:
- Option II – Medicare Supplemental
- Option II – with Dental/Vision

**Plans offered by Private Insurance Companies**
Medigap or Medicare Advantage Plans are examples of Medicare supplemental plans that, like the state’s supplemental plans, are designed to cover gaps in Medicare coverage. Some may include prescription drug coverage. If you choose another plan and cancel your state Medicare-coordinating coverage, you may **not return** to the State Retiree Health Benefits Program. If you enroll in a Medicare Advantage Plan in addition to the state program’s Medicare-coordinating plan, you will usually receive no benefit under the state program. If the Medicare Advantage plan also includes prescription drug coverage, it could result in termination of the state plan’s prescription drug coverage since you may not have more than one Medicare drug plan.

**Non-State-Sponsored Medicare Part D Plans**
If you choose one of the Advantage 65—Medical Only plans, you may obtain prescription drug coverage through separate Medicare Part D plans offered by various insurance companies. For more information about available plans and enrollment, or about Medicare in general, call 1-800-MEDICARE or go to [www.medicare.gov](http://www.medicare.gov). Note: once you have cancelled prescription drug coverage under any state-sponsored Medicare-coordinating plan, you may not add it under the state program later.

**How do I enroll at retirement?**
To assure a smooth transition from active employee coverage to retiree coverage, contact your agency Benefits Administrator about 3 months before your retirement date to complete your enrollment. Early enrollment will help prevent problems during the transition from active to retiree coverage. However, you do have 31 days from your retirement date to enroll. After that enrollment window has been exhausted, you will not have another opportunity to enroll. See Retiree Fact Sheet #2 for exception: [www.dhram.virginia.gov/healthcoverage/retireefactsheets](http://www.dhram.virginia.gov/healthcoverage/retireefactsheets).

Once your election is in effect (including waiver), you will not have an opportunity to make an election change except as allowed by the policies and procedures of the Department of Human Resource
Management (DHRM), even within the 31 days after your retirement date. If you enroll early, review your election prior to its effective date to make sure that it is accurate and complete.

If you do not wish to enroll in retiree coverage, be sure to sign the “Cancel/Decline Coverage” portion of the Enrollment Form.

**When does coverage begin?**
Coverage in the retiree group begins on the first day of the first full month of retirement if the retiree is eligible and enrolls within 31 days of his/her retirement date. Once you have enrolled in retiree coverage and the coverage begins, you may not terminate your coverage retroactively. If you change your mind and decide not to enroll in retiree coverage, be sure to rescind your enrollment prior to the effective date of coverage.

**Additional resources and information**
- For questions about eligibility, enrollment, plan choices and other information regarding health plan coverage for retirees, review the Retiree Fact Sheets which can be found at: www.dhrm.virginia.gov/healthcoverage/retireefactsheets.
- For questions about plan benefits or provider networks: contact the claims administrators, visit their web sites, or consult the plan member handbook.
- If you or any covered family member is eligible for Medicare, be sure to contact the Social Security Administration (1-800-772-1213) at least three months before your retirement date to advise of your upcoming change in employment status. If you are going to enroll in the State Retiree Health Benefits Program and are eligible for Medicare, you must also be enrolled in Medicare Parts A and B (Original Medicare) on your retirement date. If you have coverage under the state plan as an active employee prior to retirement, explain that you will be losing that coverage due to retirement. That is, you will be losing coverage based on current employment. Failure to update your records at Medicare can result in problems coordinating your health benefits and potential gaps in coverage.
- Contact Virginia Retirement System (1-888-827-3847) or visit the web site at www.varetire.org if you need information regarding the Health Insurance Credit Program.
- Review the monthly retiree premiums at www.dhrm.virginia.gov. Non-Medicare and Medicare retirees pay the full cost of health plan coverage. Premiums will be deducted from your monthly Virginia Retirement System (VRS) benefit unless your benefit will not support the premium amount or you are an Optional Retirement Plan (ORP) retiree or other retiree who does not receive a VRS benefit. In those cases, you would be billed directly by either Anthem Blue Cross and Blue Shield, Payflex (for COVA HealthAware members) or Kaiser Permanente HMO, as appropriate for your monthly premium.
- If you have other retirement questions, contact your pre-retirement agency’s Benefits Administrator or go to the Department of Human Resource Management’s Web site at www.dhrm.virginia.gov
# Non-Medicare Plans

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<th>BENEFIT</th>
<th>WHO TO CONTACT</th>
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| **COVA Care & COVA HDHP (Anthem)** | Medical, Prescription Drug, and Optional Vision & Hearing: 800-552-2682 or [www.anthem.com/cova](http://www.anthem.com/cova)  
Behavioral Health & EAP (Anthem): 855-223-9277 or [www.anthemEAP.com](http://www.anthemEAP.com)  
Dental (Delta Dental): 888-335-8296 or [www.deltadentalva.com](http://www.deltadentalva.com) |
| **COVA HealthAware (Aetna)** | Medical, Dental, Prescription Drug and Optional Routine Vision: 855-414-1901 or [www.covahealthaware.com](http://www.covahealthaware.com)  
Behavioral Health & EAP (Aetna): 888-238-6232 or [www.covahealthaware.com](http://www.covahealthaware.com) |
Dental Benefits (Dominion Dental): 888-518-5338  
Behavioral Health (Kaiser) 866-530-8778  
Employee Assistance Program (Beacon Health Options): 866-517-7042 or [www.achievesolutions.net/kaiser](http://www.achievesolutions.net/kaiser) |
| **TRICARE Supplement** | Selman Company/ASI: 866-637-9911 |

# Medicare-Coordinating Plans

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| **Advantage 65 and Option II plans – Secondary Medical Benefit (including mental health)** | Medical and Optional Vision (Anthem): 800-552-2682 or [www.anthem.com/cova](http://www.anthem.com/cova)  
Optional Dental (Anthem Dental): 855-648-1411 or [www.anthem.com/cova](http://www.anthem.com/cova)  
Optional Part D (Express Scripts): 800-572-4098 or [www.express-scripts.com](http://www.express-scripts.com) |

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

# Resources for Medicare Information

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<th>FOR MEDICARE INFORMATION</th>
<th>CALL OR VISIT THE WEB SITE</th>
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| Medicare                 | 800-MEDICARE  
[www.medicare.gov](http://www.medicare.gov) |
| Social Security Administration | 800-772-1213  
[www.ssa.gov](http://www.ssa.gov) |

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