

HEALTH BENEFITS E-NEWS EXTRA

Department of Human Resource Management Office of Health Benefits

March 19, 2010

BES Transaction Coming Soon On Qualified Medical Child Support Orders

Agencies periodically receive National Medical Support Notices requiring the child(ren) of their employee be enrolled in health coverage. The Notice explains that these dependents may not be removed from coverage unless specific disenrollment requirements are met. A Qualified Medical Support Order (QMCSO) child is added to the employee's coverage using PSB301 and Reason Code 71.

A new BES transaction, PSB355, will be available at the end of March to help agencies keep track of a new or existing qualified medical child support order. Once a dependent is set up in BES as a QMCSO child, he or she may not be removed from coverage until the QMCSO indicator is deleted.

The addition of the alternate address data on the PSB355 will ensure that our plan is in compliance with the state and federal rules as they relate to alternate recipient rights under QMCSO and member rights under HIPAA. The alternate address will be passed to the plan administrators so that communications affecting the covered child, such as ID cards, EOBs or mailings are provided to the alternative recipient or other authorized designated entity.

To setup a dependent child's QMCSO in BES:

1. Confirm that the child has been added to the participant's plan.
2. Use PSB355 and the dependent child's social security number (SSN) to enter the QMCSO data and alternate address.
3. Re-key PSB355 to make corrections if necessary.
4. Once a QMCSO is setup, BES will not allow the dependent child to be removed from coverage.

To delete a dependent child's QMCSO in BES:

1. Use PSB355 and the dependent child's SSN. Type "delete" as indicated and transmit.
2. Once a QMCSO has been removed, BES will allow the dependent child to be removed from coverage.

If you have questions about using the PSB355, contact a member of the Systems Team at the Office of Health Benefits.

Reminder: Documentation on Ineligible Dependents Removed with a QME Due March 31

Ineligible dependents for your agency who were removed from coverage with a QME after July 1, 2009 are listed on a report in your FTP folder called "DEVA-QME-Review-nnn-03052010.csv".

OHB is reviewing these records to verify the date dependents lost eligibility for the plan. Remember to send OHB a completed "Agency Request for Assistance" Form along with all documentation submitted to terminate coverage for the dependents listed on your agency's report. Send the documentation directly to Barbara Smothers by e-mail to Barbara.Smothers@dhrm.virginia.gov or by fax to (804) 371-0231. The documentation is due to OHB no later than March 31, 2010. **If documentation is not provided by March 31, these dependents will be removed from coverage effective July 1, 2009**, claims will be retracted and the member will be returned to the membership level in place prior to the dependent's removal, if applicable.