

# **HEALTH BENEFITS E-NEWS**

## ***Department of Human Resource Management Office of Health Benefits***

***April 29, 2010***

### ***National Health Reform Provision on Dependent Coverage***

A number of employees have asked about the provision in national health reform legislation pertaining to coverage for dependents up to the age of 26. The provision takes effect the beginning of the plan year following its effective date of Sept. 23, 2010. For state health plan members, that means that this component of the legislation will not take effect until **the plan year beginning July 1, 2011**. The Office of Health Benefits is awaiting regulatory guidance on this and other aspects of the legislation and will keep you informed as information becomes available.

As indicated in the Spotlight newsletter, for the upcoming plan year health reform will only impact medical flexible reimbursement accounts, which in the past have reimbursed participants for over-the-counter drug expenses. Effective January 1, 2011, over-the-counter drugs will no longer be eligible for reimbursement under the medical flexible reimbursement account.

### ***Information Update on Non-Sedating Antihistamines and ED Drugs***

In its reconvened session last Wednesday, April 21, the General Assembly approved the Governor's budget amendment which eliminates coverage for two prescription drug classes: Non-sedating antihistamines (NSAs) and drugs to treat erectile dysfunction (ED). We have received a number of questions on whether specific NSAs are covered and if OHB will provide a list of all NSA and ED drugs excluded from coverage. At this juncture, we are checking into these issues and are still working on these lists based on clinical information from our pharmacy vendors. Information will be distributed as soon as it is available. Participants taking these drugs will be individually notified by their pharmacy vendor (Medco for COVA Care, Optima for COVA Connect, and Anthem for the COVA HDHP).

### ***Open Enrollment Mailing for Non-Medicare-Eligible Retiree Group and Extended Coverage/COBRA Participants***

Open Enrollment materials will be mailed to Non-Medicare-eligible retiree group participants (retirees, survivors and LTD participants) today, April 29. While we regret that materials are going out later than usual, packages will include all information regarding benefits and premiums, including the benefit changes that resulted from the budget amendment. This will still give most enrollees two weeks to make an Open Enrollment election. The following materials are attached for your reference:

- Budget Amendment Benefit Update
- Open Enrollment Booklet Summary
- Open Enrollment Booklet
- CHIPRA Notice

Extended Coverage/COBRA Participant Open Enrollment Packages were mailed on April 28 and include the following materials, which are also attached for your reference. The COBRA materials include the budget amendment benefit changes within the booklet (no insert required).

- Open Enrollment Booklet
- CHIPRA Notice

***Reminder of BES Transaction for Revising Contact Information***

The Office of Health Benefits has a database of state agency contacts to use when distributing important health benefits communications and materials. Since January 2009, state agencies/groups have had the ability to view and update their specific contacts information using BES transaction PSB100. In general, PSB100 transactions keyed by the end of the month are reflected in the database for the following month.

For additional information and instructions, see the Health Benefits E-News dated December 17, 2008 at <http://www.dhrm.virginia.gov/hbenefits/ohbcommunications/eNews/2008/eNews121708.pdf>.