2023 SAMPLE ANNUAL AGE 26 LETTER

FOR RETIREES

(To be prepared on Employer Letterhead)

MM/DD/YYYY

Dear Retiree Group Enrollee (To be sent to the original participant, not a dependent (e.g., not a linked spouse covering the child who is aging out of the plan) :

Under the terms of The Local Choice Health Benefits Program, covered dependent children are no longer eligible for health coverage at the end of the calendar year in which they turn age 26.

The program’s Cardinal HCM System indicates that you provide coverage for a child whose eligibility will cease as of January 1, 2023. Thus, the 26-year-old-child will be automatically removed from coverage. Because your child will no longer be eligible for the program, you may be eligible for a reduced membership and lower premium cost. If you qualify, your membership will be reduced automatically effective January 1, 2024.

There are four health benefit options listed below for children who lose eligibility in The Local Choice Health Benefits Program due to age.

1. Continued coverage under The Local Choice Health Benefits Program if your child qualifies as an incapacitated dependent due to a physical or behavioral health condition, and:

· the incapacitation existed prior to the loss of eligibility due to age;

· the child is unmarried, resides full-time with the employee (or the other natural/adoptive parent) and the child is dependent upon the employee for financial support, and

· the plan administrator approves continued coverage.

Retiree group enrollees should contact the plan in which they are enrolled for the necessary paperwork to begin the request for continuation process for incapacitated dependents who are age 26 and losing coverage. Completed requests must be returned to the plan prior to January 1, 2023.

Retiree group participants enrolled in:

· Key Advantage or TLC HDHP participants must contact Anthem at 1-800-552-2682.

· Kaiser Permanente participants must contact Kaiser Permanente at 1-800-777-7902.

· Optima Health participants must contact Optima at 1-866-846-2682

Please note that the approval process can be time consuming. If you think that your child may qualify for this provision, we recommend that you take immediate action. Dependents removed from The Local Choice Health Benefits Program upon reaching age 26 can only re-enroll in coverage in one, very limited situation. Contact the Group Benefits Administrator signing this correspondence for assistance.

2. Enrollment in Extended Coverage under the provisions of the Public Health Service Act (PHSA). This coverage may last up to 36 months. An Extended Coverage Election Notice and a TLC Enrollment Form may be attached, if applicable.

3. Enrollment in non-group coverage available through your current health benefits plan. Additionally, there are other companies that offer individual coverage. Contact these plans directly to purchase non-group coverage.

4. Enrollment in the Virginia Health Insurance Marketplace. Visit HealthCare.gov for more information.

If our records are incorrect and you are not covering a dependent child who will reach age 26 by December 31, 2023, please notify the Group Benefits Administrator sending this correspondence and provide documentation of your child’s correct date of birth.

Sincerely,