Benefit Services Division
FAQs

Eligibility & Enrollment

1. **Will the new dependent eligibility criteria be effective through age 26 or up to age 26?** The expanded eligibility will cover dependents up to their 26th birthday.

2. **Will disabled dependents be able to stay on the plan after the age of 26?** Yes, as long as the dependent qualifies as disabled under the Social Security Administration guidelines before age 19.

3. **Are dependents up to age 26 eligible for coverage under all benefits?** Yes, dependent coverage will be available for medical, dental, vision and dependent life.

4. **If an employee does not have any dependents, do they have to make elections during Special Enrollment?** No. If an employee does not have dependents and does not want to contribute to Flexible Spending Accounts for October to December, no action is required for Special Enrollment.

5. **If a member enrolls a dependent during the Special Enrollment period, will they need to re-enroll for the open enrollment effective January?** No. The Open Enrollment is not mandatory/positive. Benefit elections made during Special Enrollment will roll over for the January through December 2011 plan year.

6. **When does the domestic partner coverage end?** Domestic partners coverage will be effective through December 31, 2010, and any coverage beyond December 31 is still under review.

7. **If a dependent is already enrolled in the Benefit Options plan as an "older child," will the employee need to re-enroll the dependent during Special Enrollment.** It is not required that a dependent currently enrolled on the plan be re-enrolled during Special enrollment to maintain coverage on the plan. However, if an employee wants to confirm proper enrollment they may complete an enrollment form during Special Enrollment, elect coverage for the dependent, and submit it to the Benefit Services office.

8. **If a child has fallen off coverage due to ineligibility can the employee re-enroll them as a dependent during the Special Enrollment period?** Yes. Employees wishing to enroll dependents during Special Enrollment must complete a paper enrollment form and submit it to the Benefit Services office.

9. **Can LWOP employees or members who were previously un-enrolled for non-payment re-enroll during the Special Enrollment period?** Yes. Enrollment will be accepted during the Special Enrollment period. Employees must complete and submit a paper form to the Benefit Services office.

10. **If an employee missed the QLE period (31 days) can they make changes during the Special Enrollment period?** Yes. Benefit changes will be accepted during Special Enrollment. Employees must complete and submit a paper enrollment form to the Benefit Services office.

11. **Will Benefit Services accept scanned enrollment forms during Special enrollment?** Yes. Scanned enrollment forms can be submitted to Benefitsissues@azdoa.gov

12. **Will there be an appeals process for Special Enrollment?** Yes, the process will be outlined and communicated via ListServ.

Flexible Spending

13. **How long after December 31, 2010 can members submit Flexible Spending claims incurred during October to December?** Members will have until February 28, 2011 to submit Flexible Spending Account claims incurred during October through December.

14. **When is the last deduction for Flexible Spending Accounts if a member is currently enrolled, and does not elect any additional coverage during Special Enrollment?** September 24, 2010

15. **Will the Flexible Spending Accounts reimbursement grace period still remain effective for the current plan year?** Yes. Members may incur claims until December 15, 2010 for the plan year ending September 30, 2010.

Dental

16. **Will the $50 dental deductible apply for the October to December time frame?** Members will have to meet the deductible if it was not met between October 1, 2009 and September 30, 2010. However, if the deductible was met before September 30, 2010 members will not be required to meet the $50.00 deductible again during October to December. All deductibles will be reset for January 1, 2011.

17. **Will Total Dental Administrators still be available October to December?** Yes, however, Total Dental Administrators is a pre-paid plan and there are no maximums or limitations.

18. **Does the $500 dental maximum during October to December get added to any remaining balances from the current plan year?** No. Any remaining unused balances will be reset on September 30, 2010. From October to December members will only have a $500 maximum and 1 preventive care visit.

19. **Will regular teeth cleaning be covered during the extended plan year October to December?** Yes. An exam and regular teeth cleaning is included in the 1 preventive dental visit.

20. **When will the new Delta dental cards be effective?** New cards will be issued for the Special Enrollment period and will be effective October 1, 2010 through December 31, 2011.

Vision

21. **Will there be vision coverage for the October to December time frame?** Vision coverage will be limited to one eye exam between October and December.

22. **Will eyewear be covered on the vision plan for October to December?** No. However, if a member has not used the eyewear benefit by September 30, 2010, the benefit will roll over, and they can purchase eyewear between October and December.

Other

23. **When is the first payroll deduction for the new benefits plan year?** The new plan year will begin January 2011 and the first payroll deduction will be January 14, 2011.

24. **Will the doctor's offices know about the extra benefits available during the extended plan year; October to December?** Each of the Benefit Options vendors will perform system edits to allow the additional office visits. When a member's insurance is used at the doctor's office the system will process it normally.

25. **Will the retiree plan year change back to January through December?** Yes, both the active and retired plan years will begin in January and end in December.

26. **Will there be a limitation set for Behavioral Health services during the three months of coverage October to December?** No. Behavioral Health services will remain unlimited, and will still require a pre-certification for the number appropriate visits.

27. **Will co-pays change for the new plan year?** No. All co-pays (including pharmacy) will remain the same. However, the previously proposed maternity co-pay will not go into effect and will be removed the plan document.

28. **Will the laboratory costs still be included in the preventive services fees?** Yes. Laboratory fees will continue to be billed as usual, but there will no longer be a maximum on preventive services.