SOUTHERN CALIFORNIA IBEW - NECA TRUST FUNDS



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MEMORANDUM

To: Southern California IBEW-NECA Health Plan Participants

From: Southern California IBEW-NECA Health Trust Fund Board of Trustees

Re: Dependent Eligibility Verification Process

Information about an upcoming Dependent Eligibility Verification Process Check your Mail!

Our Health Plan is responsible for paying the claims of our participants and family members. The Plan uses contributions collected pursuant to Collective Bargaining Agreements to pay premiums for the healthcare benefits. Since the cost of medical services continues to rise, it is extremely important that the Plan control these costs and not pay claims on behalf of dependents who are not eligible.

The Trustees of the Southern California IBEW-NECA Health Trust Fund, are implementing a complete review of all dependents (spouses and children) enrolled in the Plan and partnered with Consova, a firm specializing in dependent eligibility verification process. In monitoring the Plan's operations, we have become aware that there are a number of ineligible dependents covered by the Plan—either because participants do not remove them when their eligibility expires as required by Plan rules, or because participants are enrolling dependents who are not eligible.

Understand this: it is unfair to make the Plan and other participants pay for any ineligible dependents.

We realize that the Dependent Eligibility Verification may seem inconvenient for some of you, however, it is absolutely essential that we do everything we can to control Plan costs. By ensuring that we pay for the health benefits of only eligible dependents, we are controlling Plan costs—so that we can continue to provide the best possible benefits for eligible participants and eligible dependents. In preparation for the Dependent Eligibility Verification, be ready to provide copies of the certified marriage certificate, birth certificates, adoption certificate, court order/QMCSO, and federal tax returns. The Dependent Eligibility Verification mailer will commence later this month.

We hope that all participants will take the time to verify only those dependents who are legitimately eligible are enrolled in the Southern California IBEW-NECA Health Trust Fund. After we have a chance to review the results of the dependent eligibility verification, and have a clear view of the Plan's true population, the Trustees will determine whether or not another dependent eligibility verification will be scheduled in 2019.









DEPENDENT ELIGIBILITY CONSOVA

VERIFICATION

If you have a dependent enrolled in the healthcare plan, you will be asked to provide documentation to prove eligibility.

A partial list of documents you may be asked to provide includes:

- Certified Marriage Certificate
- Federal Tax Return
- Birth Certificate
- Adoption Certificate
- Court Order/QMCSO

Dependent Eligibility Verification

The purpose of this notification is to inform you of the upcoming Dependent Eligibility Verification. Your action will be required if you are covering one or more dependents with the Southern California IBEW - NECA Health Trust Fund.

Upon receipt of information from Consova, you will need to review your list of dependents to ensure that they meet the eligibility requirements and then follow the instructions provided to submit the required documents for dependent eligibility verification.

What is a Dependent Eligibility Verification?

A Dependent Eligibility Verification ensures that **only qualified dependents** are enrolled in Southern California IBEW - NECA Health Trust Fund. Consova's experience shows that 5% to 8% of enrolled dependents are typically ineligible for the plan. Their subsequent removal results in a 3% to 5% reduction of annual plan expense. This process will help reduce the escalation of benefit plan rate increases, which is good for everyone, including you as a Plan participant.

Why is the Southern California IBEW - NECA Health Trust Fund conducting an Audit?

As part of the Southern California IBEW - NECA Health Trust Fund's efforts to ensure that participants have affordable options, we want to ensure that only eligible dependents are enrolled. If participants are enrolling ineligible dependents – this increases costs, and those costs are shared, in part, by participants, through increased premiums, requiring greater allocations to health care.

Who will be contacting me?

You will be receiving a mailing from Consova at your address of record containing important information pertaining to the upcoming verification. Consova is focused on making this necessary process as easy as possible for you; but please understand that if there is not a response from you, this could result in the termination of coverage for your dependent(s). Please be assured and understand that any/all information you provide to Consova is kept secure and confidential, at ALL times.