

# PEIA Benefit Coordinator WCC Policy

# Policy Version 1

Legal/Compliance Responsible Parities: General Counsel Date Created: 02/24/2022 Date Approved: 03/01/2022 Effective Date: 0/4/11/2022/ Reviewed: 08/01/2023

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#### 1. POLICY

West Virginia Public Employees Insurance Agency (PEIA) depends upon Benefit Coordinators in its relationships with participating Employers to facilitate the delivery of insurance to employees.

This Policy shall apply to West Virginia Public Employees Insurance Agency, ("PEIA") and Benefit Coordinators.

PEIA is an "Employer Sponsored Health Plan" where the "Employer Sponsor" is the State of West Virginia. "Employer Sponsor" rights and privileges are solely reserved to PEIA and the West Virginia Department of Administration. PEIA-participating agencies, including other state agencies, do not share those rights and privileges.

#### 2. DEFINITIONS

Unless otherwise stated, specific terms used in this Policy or any related procedures developed in accordance with this Policy shall have the same definitions specified within the PEIA Summary Plan Description.

"Benefit Coordinator" means a person assigned by the participating Employer agency who is responsible for the employer's duties under Plan rules with regard to enrollment, changes in status, terminations, and other plan matters.

"CPRB" is the West Virginia Consolidated Public Retirement Board.

"DOA" means the West Virginia Department of Administration – the Cabinet Level Department which oversees PEIA operations

"Employee" means an Employee of a participating Employer as defined in West Virginia Code §5-16-2(3)

"Employer" means a participating Employer as defined in West Virginia Code §5-16-2(4)

"General Counsel" means the PEIA's General Counsel or his or her designee.



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"HIPAA" means the Health Insurance Portability and Accountability Act of 1996 Public Law 104-191 – Federal law which protects the confidentiality, privacy, security, and integrity of protected health information.

"IRS" is the United State Internal Revenue Service

"MMB" is the PEIA 'Manage My Benefits' website and portal for use by policyholders only for reviewing and managing their benefits.

"PEIA" is the West Virginia Public Employees Insurance Agency

"Privacy Act of 1974" as amended, 5 U.S.C. § 552a, establishes a code of fair information practices that governs the collection, maintenance, use, and dissemination of information about individuals that is maintained in systems of records.

**SPD** is the PEIA Summary Plan Description which is based on the PEIA Plan Document, both of which are filed each year with the Secretary of State's Office and have the effect of Legislative Rule (law).

"Title 42 CFR, Part 2" is the Federal law that governs the confidentiality and privacy of mental health and/or substance abuse records.

"True and correct copy" is a copy of a document that is an exact and complete image reproduction of the original document with nothing reduced, enlarged, added, altered, entered, supplemented, or externally visible in the depiction of the document.

"USCIS" is the United States Customs and Immigration Service.

"WCC" – Web Contribution Coordinator means a person assigned by the participating Employer Agency who is responsible for the employer's duties under Plan rules with regard to the payment of Employer Agency and/or member premiums

#### 3. PROCEDURES

- 1. Benefit Coordinators are not employees of PEIA but are Employer-designated liaisons between PEIA and insured members..
- 2. Benefit Coordinators agree and understand that their Employer Agency is an entity that is either allowed by law or required to participate in an



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- "Employer Sponsored Health Plan" where the "Employer Sponsor" is the State of West Virginia. The individual participating Employer Agency is not the "Employer Sponsor" and has no rights as such.
- 3. Benefit Coordinators must understand that PEIA is an Employer Sponsored health plan based on the laws of the State of West Virginia and is not subject to oversight or compliance with law(s), rule(s), or regulation(s) of other states or foreign sovereigns if the Policyholder lives outside the State of West Virginia or the United States. PEIA does comply with applicable federal law(s).
- 4. Benefit Coordinators should understand that PEIA is a non-ERISA Plan (ERISA being the Employee Retirement Income Security Act of 1974).
- 5. Benefit Coordinators should understand that Title II of HIPAA requires PEIA to implement administrative, physical, and technical safeguards to prevent against "fraud, waste, and abuse" of healthcare, including insurance(s).
- 6. A PEIA-participating Employer may have as many Benefit Coordinators as it deems necessary, but all designated Benefit Coordinators must be registered with PEIA and must complete the requisite training.
- 7. Benefit Coordinators shall serve as the primary point of contact between the Policyholder and PEIA. Nothing shall prohibit a Policyholder from directly contacting PEIA regarding any concerns about their coverage.
- 8. Benefit Coordinators may also serve as Web Contribution Coordinators (WCCs) for their participating Employer Agency. An Employer Agency may have as many WCCs as it deems necessary.
- 9. Benefit Coordinators and WCCs are provided training either in person or on-line regarding their duties with respect to the handling of PEIA insurance
- 10. Benefit Coordinators must understand that all information pertaining to the enrollment, management, termination, or payment for PEIA health insurance is regulated under applicable provisions of the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Benefit Coordinators may only share this information with authorized, HIPAA-trained persons.
- 11. Other information that Benefit Coordinators may have access to such as dependent information, etc., may be regulated under other State or federal privacy laws, rules, regulations or statutes such as: the Privacy Act of 1974; Title 42, Part 2 CFR; FCCRA; ERISA; the Social Security Act; and others
- 12. Benefit Coordinators and WCCs shall have access to support from the following within PEIA:



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- a. PEIA Benefit Coordinator Liaison
- b. PEIA Communications Director
- c. PEIA Eligibility Staff
- d. PEIA Eligibility Supervisor
- e. PEIA Premium Accounts Staff
- f. PEIA Premium Accounts Supervisor
- g. PEIA Privacy & Security Officer
- 13. Benefit Coordinators and WCC's shall have the additional support and reference from:
  - a. The PEIA Shopper's Guide
  - b. The PEIA Summary Plan Description (SPD)
  - c. PEIA Training updates
  - d. The PEIA Website
  - e. PEIA's Benefit Coordinator Reference Manual
  - f. The PEIA website with access to documents and other resources
  - g. Designated PEIA vendor representatives
- 14. If a Benefit Coordinator or WCC has a question or concern about a specific plan issue or member concern, they are encouraged to seek guidance from PEIA staff before advising a member or dependent.
- 15. Benefit Coordinators will be assigned access to PEIA's benefits management portal to facilitate the performance of their duties. Access to this portal is a privilege and not a right.
- 16. Web Contribution Coordinators will be assigned access to PEIA's web contributions payment management portal to facilitate the performance of their duties. Access to this portal is a privilege and not a right.
- 17. Benefit Coordinators and WCC's accessing the portals are subject to the security rules and provisions of that portal. Failure to follow those security rules and provisions may result in the termination of access privileges. The Security notices for the portals are clearly posted prior to entering. PEIA reserves the right to update, alter, or otherwise enhance the security features or policies of the portal.
- 18. Benefit Coordinators and WCC's may not share their access credentials or privileges with any third party.
- 19. Benefit Coordinators and WCC's will need to have a unique user e-mail address that is theirs and theirs alone. PEIA cannot allow access to "generic" or "ghost" e-mails such as, <a href="clerk@anytownwv.com">clerk@anytownwv.com</a> or <a href="BC@wvstate.com">BC@wvstate.com</a> or <a href="benefitsguy@myagency.com">benefitsguy@myagency.com</a>. HIPAA rules on the "Accountability of Disclosures" require that PEIA be able to account for and identify the specific individuals who access a member's information and when. "Shared" e-mail addresses or mailboxes accessible by non-



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authorized parties are not permissible for use in conducting PEIA business.

- 20. Benefit Coordinators should advise participating employees that access to the PEIA MMB site is for the policyholder ONLY and dependents, including spouses, and/or others (Agents, Guardians, etc.) are not permitted to access the site. The site is the property of the State of West Virginia and only the State and/or PEIA has/have the right to grant access. Policyholders do not have the authority and/or right to assign and/or delegate access permission(s) to third parties, e.g. spouses, dependents, others.
- 21. Benefit Coordinators will note that Enrollment Forms, Change-In-Status forms, and other PEIA documents contain an attestation for the Benefit Coordinator to acknowledge that they affirm that the information on the form is true and correct. Benefit Coordinators should not sign nor submit any forms that they believe are not fully truthful and correct. Examples: An employee marks that they are "tobacco free" but the Benefit Coordinator knows this is not the case, or an Employee signs a "Spousal Affidavit" and reports that his spouse is not employed and/or not eligible for insurance through her employer when that is not factual
- 22. Plan eligibility rests solely with PEIA. Applications for coverage, Change-In-Status forms, and other enrollment forms must: (a) contain the requisite information and supporting documentation, e.g. birth certificates, marriage certificates, Guardianship Orders, divorce decrees, etc., and; (b) be filed with PEIA in a timely manner as defined by the PEIA SPD. Determinations of Plan Eligibility rest solely with PEIA or, in the case of supporting benefits such as life insurance, with its contracted partner. Failure to immediately report events which end or affect eligibility, such as employment terminations, divorce, incarceration, removal of children from a home, etc. may result in PEIA's seeking repayment of claims paid on behalf of ineligible Policyholders or dependents.
- 23. If the policyholder meets his/her obligation to immediately report events that affect eligibility to their Employer agency, such as a divorce, and the Employer agency does not report the events to PEIA, the Employing agency shall be responsible for reimbursing PEIA for any and all medical or pharmacy claims paid on behalf of ineligible dependents. It shall be the policyholder's responsibility to provide proof to PEIA that they reported the eligibility event to their Employer as required in the PEIA Summary Plan Description.



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- 24. PEIA reserves the right to administratively terminate coverage for dependents or Policyholders that it has confirmed are no longer eligible for coverage under the Plan.
- 25. PEIA is under no obligation to: (a) grant retroactive coverage to an Employee or dependent, or; (b) retroactively terminate a member's coverage to a date prior to the submission of the required documents, or; (c) pay any claims for a Policyholder or dependent, or; (d) make any other modifications or adjustments to coverage if there was a breach of duty as outlined in Item #20 above by the Benefit Coordinator or Employer agency.
- 26. Benefit Coordinators or policyholders may file an appeal to PEIA of an adverse decision on member or dependent eligibility. Whoever files the appeal must clearly state the reasons for the appeal and provide the necessary forms and documentation, if applicable, needed in support of the appeal.
- 27. Benefit Coordinators should never "backdate" documents.
- 28. When submitting documents to PEIA, unless otherwise specified, PEIA requires a legible (readable) "true and correct" copy of the document. Partial and/or incomplete submissions are not acceptable. PEIA reserves the right to reject document submissions that are not "true and correct" copies of the originals.
- 29. When submitting documents to PEIA, "pictures" and/or photographs of legal documents are not acceptable as they are not, "true and correct" copies of originals. "True and Correct" copies would be considered copied or scanned to PDF formats. Legal documents include, but are not necessarily limited to:
  - Enrollment forms
  - Spousal Affidavits
  - Change In Status Forms
  - Retirement Paperwork
  - Termination forms
  - Life Insurance forms
  - Powers of Attorney
  - Premium Assistance forms and supporting documents
  - Guardianship paperwork
  - Divorce decrees PEIA only requires the first and last page
  - Marriage certificates
  - Birth certificates
  - National Medical Support Notices
  - Visas/Immigration documents



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- Adoption documents
- Other, i.e. Executor of Estates, etc.

30. PEIA will accept legible, unaltered photos of the following:

- Medicare cards
- Social Security Cards
- Employee Identification cards
- 31. Benefit Coordinators cannot enter life insurance beneficiary information for a policyholder. They shall have no authority to change or alter beneficiaries. It is the Policyholder's sole responsibility to nominate, change, alter, or amend life insurance beneficiaries through the contracted Life Insurance partner.
- 32. Benefit Coordinators are to have employees complete the "Spousal Affidavit" form upon enrollment in PEIA. Employees must be truthful in completing this form. Benefit Coordinators should not submit affidavits that are not truthful and should report to PEIA if an employee is submitting an untruthful affidavit. See West Virginia Code §5-16-13.
- 33. Benefit Coordinators and their Employer agencies are required to provide to PEIA documents related to Policyholder or the agency's participation in PEIA upon request.
- 34. Benefit Coordinators may share and/or exchange information with PEIA for purposes of enrollment, changes in status, terminations, and other PEIA plan matters without the signed consent of the policyholder under the meaningful use provisions of HIPAA as it relates healthcare operations. Conversely, PEIA can share policyholder or dependent information with Benefit Coordinators as it directly relates to the meaningful use of healthcare operations.
- 35. The PEIA SPD provides guidance to members and Benefit Coordinators as to what documents are required to establish dependent eligibility, i.e. a valid marriage certificate to add a spouse or a valid birth certificate to add a dependent child. Certain eligibility situations, i.e. adoptions, guardianships, etc., require copies of legal documents to be submitted to support eligibility. A "notarized" document does not necessarily make a document a "legal" document. IRS eligibility as a dependent does not satisfy PEIA dependent eligibility requirements.
- 36. All documents submitted to PEIA in support of member or dependent eligibility must be in English. It is the member's responsibility to have any needed translations completed. Translations of documents must be certified translations.
- 37. PEIA, as a State Agency, is required by federal law to take certain steps to validate or verify a person's eligibility benefits, including immigration



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- status. It is the Employer Agency or member's responsibility to provide the necessary legal documentation, i.e. Visas, USCIS Sponsorship documents, etc. to support that the member is eligible for PEIA benefits.
- 38. PEIA recognizes that a member may not be available to sign a form or document, or that they may refuse to sign a form or document. If this is the case, the Benefit Coordinator should clearly document, "Member unable to sign" with a reason as to why and how attempts were made to contact the member, OR document that the member "REFUSED TO SIGN". Changes to insurances may result in legal challenges and any non-member signed documents prompting change must document as to why the member was not given the opportunity to provide informed consent.
- 39. Benefit Coordinators are required to report to PEIA and the CPRB Leaves of Absence (LOA). The report is to include the LOA employee's name, the date their LOA became effective, and the expected date that the LOA will end. Failure of a participating Employer Agency to comply with PEIA's LOA policy as outlined in the PEIA SPD may result in that Employer Agency being liable for any or all claims paid as a result of a non-compliant LOA.
- 40. PEIA may notify a Benefit Coordinator if it receives a valid National Medical Support notice (typically related to child support) compelling the adding of coverage for either the member or eligible dependents. PEIA is obligated to comply with the terms and conditions of these Orders. PEIA reserves the right to administratively add coverage as required by said Orders. The provisions of a National Medical Support Order cannot be waived by PEIA unless PEIA receives, in writing, a waiver of such obligation by the child support agency having jurisdiction.
- 41. PEIA may notify a Benefit Coordinator if it has reason to believe that a Policyholder has violated the rules or policies of the Plan. PEIA, to the extent possible by law or policy, keeps the Employer agency informed of any inquiry, investigation, or audit of a Policyholder's situation.
- 42. Neither PEIA nor its General Counsel can provide Benefit Coordinators, participating Employer agencies, or Policyholders legal advice. PEIA can provide guidance on how particular situations or cases are applied in terms of the applicable PEIA policies, procedures, rules, or law.

#### 3. ADDITIONAL GUIDANCE

#### West Virginia Code §5-16-2. Definitions

(4) "Employer" means the State of West Virginia, its boards, agencies, commissions, departments, institutions, or spending units; a county board



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of education; a public charter school established pursuant to §18-5G-1 et seq. of this code if the charter school includes in its charter contract entered into pursuant to  $\S18-5G-7$  of this code a determination to participate in the Public Employees Insurance Program; a county, city, or town in the state; any separate corporation or instrumentality established by one or more counties, cities, or towns, as permitted by law; any corporation or instrumentality supported in most part by counties, cities, or towns; any public corporation charged by law with the performance of a governmental function and whose jurisdiction is coextensive with one or more counties, cities or towns; any comprehensive community mental health center or intellectually and developmentally disabled facility established, operated or licensed by the Secretary of Health and Human Resources pursuant to §27-2A-1 of this code and which is supported in part by state, county or municipal funds; a combined city-county health department created pursuant to §16-2-1 et seq. of this code; and a corporation meeting the description set forth in §18B-12-3 of this code that is employing a 21st Century Learner Fellow pursuant to \$18A-3-11 of this code but the corporation is not considered an employer with respect to any employee other than a 21st Century Learner Fellow. Any matters of doubt as to who is an "employer" within the meaning of this article shall be decided by the director. The term "employer" does not include within its meaning the National Guard.

West Virginia Code §5-16-12a. Inspections; violations and penalties. Part (a) Employers and employees participating in any of the Public Employees Insurance Agency plans shall provide, to the director, upon request, all documentation reasonably required for the director to discharge the responsibilities under this article. This documentation includes, but is not limited to, employment or eligibility records sufficient to verify actual full-time employment and eligibility of employees who participate in the Public Employees Insurance Agency plans.

West Virginia Code §5-16-12a. Inspections; violations and penalties. – Part (e) Only authorized employees or agents shall have access to confidential data or systems and applications containing confidential data within the Public Employees Insurance Agency.

West Virginia Code §5-16-13. Payment of costs by employer and employee; spouse and dependent coverage; involuntary employee termination coverage; conversion of annual leave and sick leave



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authorized for health or retirement benefits; authorization for retiree participation; continuation of health insurance for surviving dependents of deceased employees; requirement of new health plan; limiting employer contribution.

- (a) Cost-sharing. The director shall provide plans that shall be paid by the employer and employee.
- (b) Spouse and dependent coverage. —(1) An employee is entitled to have his or her spouse and dependents included in any plan to which the employee is entitled to participate.
- (2) The spouse and dependent coverage is limited to excess or secondary coverage for each spouse and dependent who has primary coverage from any other source. If an employee's spouse has health insurance available through an employer not defined in §5-16-2 of this code, then the employer may not cover any portion of premiums for the employee's spouse coverage, unless the employee adds his or her spouse to his or her coverage by paying the cost of the actuarial value of the plan: Provided, That this does not apply to spouses of retired employees or employers subject to §5-16-22 of this code. For purposes of this subsection, "actuarial value" means the value as recommended by healthcare actuaries under §5-16-5 of this code.

The director may require proof regarding spouse and dependent primary coverage and shall adopt rules governing the nature, discontinuance, and resumption of any employee's coverage for his or her spouse and dependents.

#### 5. AUTHORITY/REFERENCE

- 1. West Virginia Code 5-16-1 et seq
- 2. W. Va. Code §5A-8-21
- 3. PEIA Summary Plan Description
- 4. PEIA Plan Document
- 5. PEIA Benefit Coordinator Handbook
- 6. Public Health Services Act, as amended, P.L. 117-81
- 7. 42 U.S. Code Chapter 6A PUBLIC HEALTH SERVICE
- 8. The Health Insurance Portability and Accountability Act of 1996 (HIPAA)
- 9. Title 42 CFR, Part 2
  - a. Subpart A Introduction (§§ 2.1 2.4)
  - b. Subpart B General Provisions (§§ 2.11 2.23)



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- c. Subpart C Disclosures With Patient Consent (§§ 2.31 2.36)
- d. Subpart D Disclosures Without Patient Consent (§§ 2.51 2.53)
- e. Subpart E Court Orders Authorizing Disclosure and Use (§§ 2.61 2.67)

 5. ASSOCIATED FORMS				
PEIA	forms	and	Downloads:	https://peia.wv.gov/Forms-
Downlo	oads/Pages	/default		