

FAQs for Non-participating Localities

A. Changes by the 2012 General Assembly

Q: What changes impacting non-participating localities were enacted by the 2012 General Assembly?

Effective July 1, 2012, non-participating employers are responsible for self administering the payment of benefits in accordance with the Line of Duty Act (LODA).

All LODA eligibility determinations must continue to be conducted by the State Comptroller following an investigation in accordance with § 9.1-403-404 of the Code of Virginia.

B. Case Approval and Initial Payment Information

Q: When a death claim is approved for my locality, will the State Comptroller inform the claimant and my locality how much to pay?

Yes. The State Comptroller's office will send a letter to the family notifying them of the benefit decision. The State Comptroller's office will also notify the locality of the effective date of the claim, how much to pay, and to whom to make the payment. Some cases require payments to more than one person.

Q: How are individuals eligible to receive the death benefit payment identified by the State Comptroller?

If the claimant had a will the death payment is made based on the instructions of the will. In the event there is not a will the payment is made based on Virginia Code § 61.1-1 *Course of descents generally*.

Q: Do all death claims qualify for health insurance benefits?

Not all do. However, any death claim that has a surviving spouse and/or dependent children may qualify for the health insurance benefit. In such cases the State Comptroller's office will determine who is eligible based on the provisions of the LODA and the amount of health insurance benefit due and will notify the locality of how much to pay and to whom the payment is due.

Q: Who will be responsible for answering questions from claimants or localities concerning original determination of benefits for locality employees?

The DOA Line of Duty Coordinator at 804-786-1856 or lineofduty@doa.virginia.gov will be responsible for answering questions from claimants or localities concerning the approval/denial of LODA benefits for locality claimants.

Q: A disability claim is approved for an employee or volunteer in my locality. Who determines the amount of the health insurance reimbursement due to the claimant?

The State Comptroller's office will calculate the prior health insurance amounts paid by the claimant for health insurance between the date of disability (or retirement if later) and the claim approval date and notify the claimant and the locality of the amount that the locality must reimburse the claimant. Some cases require payments to more than one person and each individual will be notified.

Q: For what plan of health insurance benefits is the claimant entitled to be reimbursed?

The continued health insurance coverage provided shall be the same plan of benefits which the deceased or disabled person was entitled to on the last day of his active duty or comparable benefits established as a result of a replacement plan. A comparable replacement plan could be necessary if the claimant's pre-disability insurance coverage lapses for any reason.

Health insurance covers medical insurance, dental insurance, vision insurance, and prescription insurance, including related Medicare coverage.

Q: Who will be responsible for answering the health insurance benefit questions from claimants?

The DOA Line of Duty Coordinator will handle inquiries concerning prior health insurance payments. Once the amount of prior payments is established and the locality is notified to make the payment, the locality will be responsible for answering all questions concerning benefits and payments made to the claimant. The State Comptroller's office will not have access to information regarding individual payments made to or on behalf of locality claimants after July 1, 2012.

Q: If a paid public safety employee also volunteers for a separate locality, how is the claim billed if this individual dies "off duty" under the heart/lung/cancer presumption?

Both localities would share in the cost of the claim. In eligibility notifications, the State Comptroller's office would apply an 80%/20% split in costs, with the higher percentage being assigned to the employing locality.

Q: Will the State Comptroller's office notify localities of the status of all my approved claims?

Yes. The State Comptroller's office will send notification of approved claims by June 1, 2012, to localities that have approved opt-out resolutions on file at VRS.

C. Locality Payment and Responsibilities

Q: Do claimants who have become Medicare eligible still receive LODA benefits?

Yes. Medicare eligible claimants remain eligible for LODA benefits. In such cases, Medicare becomes the claimant's primary insurance and the locality's insurance becomes secondary.

If the locality does not offer a supplemental plan, the claimant is entitled to procure and be reimbursed for a Medicare Part C (supplemental) plan. Claimants with prescription, dental and/or vision coverage are entitled to continue to be reimbursed for such coverage through a private plan.

Q: Who will make payments to claimants for Medicare or any other insurance that is not sponsored by the locality?

The locality must make these payments in a timely fashion as to prevent any **lapse in insurance coverage**.

Payments are typically made monthly to private companies (e.g., **Anthem, Blue Medicare Rx**) that are paid directly for the claimant's health insurance premiums and should be mailed 10 days prior to the due date to avoid any lapse in coverage. Quarterly payments are made to claimants with Medicare coverage and/or pay their own health insurance premiums and should be mailed in advance of the coverage quarter.

Q: What are the coverage quarters used for payment purposes and when are the payments due to be mailed to the claimant?

The coverage quarters are:	1 st	January – March	payment due out by December 25 th
	2 nd	April – June	payment due out by March 25 th
	3 rd	July – September	payment due out by June 25 th
	4 th	October – December	payment due out by September 25 th

Many claimants prefer direct deposit if your locality can provide it.

Q: When must non-participating localities make their first payments for existing claimants?

Non-participating localities must make whatever payments are required under the LODA. Localities should note that certain health insurance benefits available to claimants under the LODA must be paid in advance (e.g., June, 2012) for the coverage period (e.g., July, 2012) to avoid any lapse in coverage.

Q: My former employee would like to upgrade his health insurance coverage (e.g., addition of a new spouse, a child, dental, vision). Is this allowed?

Health insurance program eligibility rules govern such changes. However, even though a program may permit coverage changes, **such coverage changes resulting in an increased cost of coverage are not reimbursable under LODA benefits. Such increased cost must be at the claimant's expense.**

D. Dependent Information

Q: An approved claimant is divorced from their spouse. Is the spouse entitled to continue with the LODA coverage?

No. Coverage ends at the end of the month that the divorce decree is issued.

Q: Will the State Comptroller's office monitor student status on dependents over age 21 in order to confirm that they should be paid for health insurance coverage?

No. Each locality must monitor dependent's ages and confirm that their health insurance benefit should continue. Dependents over age 21 are not eligible for insurance coverage if they are not permanently disabled or a full-time student under the age of 25. A student is considered a full-time college student if he or she is enrolled with a minimum of 12 semester credit hours at a college. Proof of each semester is required. Coverage ends at the end of the month that the dependent stops being a full-time student.

Q: Federal law allows dependents to stay on their parent's health insurance until age 26. How does this effect LODA coverage?

LODA is a separate benefit and is not governed by federal law. When a dependent is no longer covered under LODA guidelines, a claimant may choose to keep his dependents on his or her insurance until age 26, but this must be done at the claimant's expense.

E. Miscellaneous

Q: Will the cost of a Virginia State Police investigation be included in the State Comptroller's administrative fee?

No. The Virginia State Police will send a separate bill for the investigation costs.