

Getting the most from your COVA Care Plan

July 1, 2026 through June 30, 2027



Commonwealth
of Virginia



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Anthem Health Guide

Anthem Health Guides are people specially trained to answer your health plan questions and lead you to the right programs and support for your unique needs. Your guide will also remind you of any screenings or routine exams that are due, help you save money on your prescription drugs, compare costs for care, and find doctors in your area.

- Connects you to tools and resources
- Gives you personal support
- Directs you to higher quality, lower cost services
- Refers you to special programs if needed

**Call your Anthem Health Guide at
1 800 552 2682.**



What's in your COVA Care Plan?



Your plan includes:

- Medical, Behavioral Health, Employee Assistance Program (EAP), and Prescription Drug benefits administered by Anthem Pharmacy, delivered by CarelonRx
- Diagnostic and preventive dental benefits administered by Delta Dental
- Specialist visits with no referrals
- Routine eye exam once per plan year
- 100% coverage for in-network preventive care, no deductible
- In-network coverage through the Anthem PPO network in Virginia, and the BlueCard® PPO and Blue Cross Blue Shield Global Core Programs for care outside Virginia
- Optional Benefits (*available for an additional premium*): Expanded Dental, Vision & Hearing and Out-of-Network

Your Out-of-Pocket Expense Limit

\$1,500 for one person, **\$3,000** for two or more persons, each plan year

Your deductible, and copayments/coinsurance for **medical, behavioral health and prescription drugs** all count toward the limit. Once you reach the limit, you pay \$0 for covered in-network medical and behavioral health services, and covered prescription drugs for the remainder of the plan year.

These expenses **do not** count toward the limit:

- Amounts above the allowable charge or plan limits
- Services and supplies not covered by your plan
- Copayments, coinsurance and deductibles for optional expanded dental, and optional routine vision/hearing benefits (exception: routine eye exam for members through the end of the month they turn 19 years old)
- 25% reduction in the amount paid by your plan under the out-of-network benefits option

COVA Care Benefits At-A-Glance

In Network Benefits	You Pay
Deductible – per plan year	
One person	\$300
Two or more persons	\$600
Out-of-pocket expense limit – per plan year <i>(medical, behavioral health and pharmacy costs count toward the limit)</i>	
One person	\$1,500
Two or more persons	\$3,000
Ambulance travel	20% after deductible
Autism Spectrum Disorder treatment and related services	\$25 per service / \$40 per specialist
Behavioral Health	
Inpatient	\$300 per stay
Residential Treatment	\$300 per stay
Partial Day Hospitalization Program	\$125 per episode of care
Intensive Outpatient Treatment Program (IOP)	\$125 per episode of care
Outpatient Treatment Program	
– Facility services (per episode of care)	\$125
– Medical and non-medical professional	\$25 per visit
Chiropractic, manual medical interventions (30-visit plan year limit)	\$25 PCP / \$35 Specialist
Dental Services (routine)	
Diagnostic and preventive (routine oral exams and cleanings twice per plan year, x-rays, sealants and fluoride for children) See page 14 for Expanded Dental Option	\$0
Diagnostic tests, x-rays, labs and injections (outpatient)	20% after deductible
Dialysis treatments	\$0
Doctor’s office visits (in person or online)	\$25 PCP / \$40 Specialist
Emergency room visits	\$300 per visit (waived if admitted)
Employee Assistance Program (EAP) Up to 4 visits per issue, per plan year	\$0
Hearing Aid (18 and younger) <i>Dependents 18 years old and younger one hearing aid per ear, up to a cost of \$1,500, every 24 months. Costs above \$1,500 can be paid out-of-pocket or applied to the optional buy-up Hearing Benefit. See page 14.</i>	\$0
Home health services (90-visit plan year limit)	\$0
Home private duty nurse’s services	20% after deductible
Hospice care	\$0

NOTE: This is a summary of benefits. For a complete description of the benefits, exclusions, limitations and reductions under the plan, refer to your COVA Care member handbook, available at anthem.com/cova.

In Network Benefits	You Pay
Hospital services	
Inpatient	\$300 per stay
Outpatient	\$125 per visit
Maternity	
Professional provider services (<i>prenatal & postnatal care</i>)	\$25 PCP / \$40 Specialist
Delivery by PCP or Specialist	\$0
Hospital services for delivery (<i>delivery room, anesthesia, routine nursing care for newborn</i>)	\$300 copayment per stay ¹
Outpatient diagnostic tests	20% after deductible
Medical equipment, appliances, and supplies	20% after deductible
Prescription drugs – mandatory generic	
Deductible	\$150 for one person \$300 for two or more persons for Tiers 2, 3 & 4
Retail Pharmacy	Copayment for up to 34- day supply: <ul style="list-style-type: none"> • Tier 1 – \$15 • Tier 2 – \$30 • Tier 3 – \$45 • Tier 4 – \$55
Home Delivery Pharmacy	Copayment for up to 90- day supply: <ul style="list-style-type: none"> • Tier 1 – \$30 • Tier 2 – \$60 • Tier 3 – \$90 • Tier 4 – \$110
Skilled nursing facility (<i>180-day limit per stay</i>)	\$0 per stay
Therapy services	
Cardiac Rehabilitation, Radiation, and Respiratory therapy	\$0
Infusion therapy (<i>includes IV and injected chemotherapy</i>)	20% after deductible
Occupational and Speech therapy	\$25 PCP / \$35 Specialist
Physical therapy <i>only</i>	\$15 PCP and Specialist
Physical therapy and other related services (<i>including manual intervention & spinal manipulation</i>)	\$25 PCP / \$35 Specialist
Virtual Care through Sydney Health app	
LiveHealth Online	\$0
Virtual Wellness/Preventive Visit	\$0
Vision (<i>routine eye exam once per plan year</i>)	\$15 copayment
Wellness & preventive services	
Office visits at specified intervals, immunizations, lab and x-rays	\$0
Annual check-up visit (primary care or specialist), immunizations, lab and x-rays	\$0
Routine gynecological exam, Pap test, mammography screening, prostate exam (digital rectal exam), prostate specific antigen (PSA) test, and colorectal cancer screening	\$0

¹\$300 hospital copayment is waived if you enroll in Building Health Families and complete the required steps. See page 12 for details.



Medical and Behavioral Health

Many of your medical and behavioral health services require a copayment. Some services require 20% coinsurance after meeting a deductible. See the COVA Care Benefits at a Glance for the details.

Medical providers include:

- Primary care physicians who are general or family practitioners, internists and pediatricians
- Specialists such as endocrinologists or cardiologists (No Referral Needed)

Behavioral health providers include:

- Clinical social workers, professional counselors, clinical nurse specialists, and marriage/family therapists
- Psychologists
- Psychiatrists

To avoid higher out-of-pocket costs, always check to be sure a provider is in the network. Simply ask the provider, call your Anthem Health Guide, or go to [anthem.com/cova/find-care](https://www.anthem.com/cova/find-care) and select *Find Care for COVA Care (PPO)*.

Your Anthem Provider Network

Anthem has one of the largest provider and hospital networks in the state of Virginia.

Network **medical and behavioral health providers** accept the allowable charge as payment in full after you pay any applicable deductible, copayment or coinsurance. That means lower out-of-pocket costs for you.

Finding an in-network provider is easy.

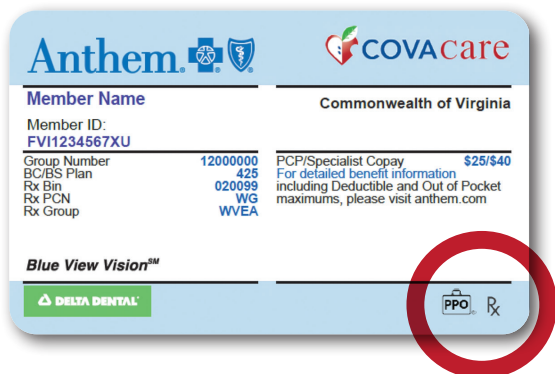
1. Go to [anthem.com/cova/find-care](https://www.anthem.com/cova/find-care) and select *Find Care for COVA Care (PPO)*.
2. Log in to the **Sydney Health mobile app** and click on *Care*.
3. Call Anthem Health Guides at **1-800-552-2682** for help.

Care When Traveling

BlueCard® PPO Program for care in the U.S.

What happens if you're traveling or living outside Virginia and you need care? You have access to care across the country through the **BlueCard® PPO Program**. This includes a large number of providers and hospitals nationwide. When you see a BlueCard program doctor or hospital you pay only your usual plan deductible, copayment or coinsurance, and the provider files your claim for you. If you go to a doctor or hospital outside the program, you'll need to pay the entire bill up front and file your own claim.

Always show your Anthem ID card when you receive services. The "PPO-in-a-suitcase" symbol shows you can get care from BlueCard PPO Program providers.



Looking for a BlueCard PPO Program doctor or hospital?

1. Go to bcbs.com and select Find a Doctor.
2. Log in to the Sydney Health mobile app and click on *Care*.
3. Call Anthem Health Guides at **1-800-552-2682** for help.

Good to Know

Medical transport from another country to the United States (known as medical repatriation) is not covered under your plan. You may want to purchase travel insurance to cover that for you.



Blue Cross Blue Shield Global Core Program for care outside the U.S.

If you're outside the U.S. and need care:

- Go to bcbsglobalcore.com and register or login. You can also download the **Blue Cross Blue Shield Global Core app** to search for a doctor or hospital.
- Need help finding a doctor or hospital, or have questions about getting care abroad? Call the Blue Cross Blue Shield Global Core Service Center 24/7 at **1-800-810-2583 (BLUE)** or call collect at **1-804-673-1177**. A service representative will help you set up a doctor visit or hospital stay. An assistance coordinator, together with a medical professional, will arrange a doctor's appointment or hospital stay, if needed.
- Contact the Blue Cross Blue Shield Global Core service center if admitted to the hospital, and call the Member Services number shown on your ID card for precertification.
- You will need to pay up front for care, then fill out a Blue Cross Blue Shield Global Core claim form. Send the form and the bill(s) to the address on the form. Download the claim form from bcbsglobalcore.com and enter the three-digit alpha prefix found on your ID card. Or call Anthem Health Guides to request the form.

Virtual Care through Sydney Health

Life is busy. When you need care and are short on time, you have many options for quick and convenient virtual care through the Sydney Health app. Use your smartphone to access virtual care solutions for all your physical and behavioral health needs.

After you log in to the app, select Care and then Virtual Care.

Care or service	Virtual Care Provider	Hours available
Urgent care <ul style="list-style-type: none"> Cough, cold, rash, pink eye, bladder issues, minor cuts, sprains, etc. 	LiveHealth Online	24/7
Primary care <ul style="list-style-type: none"> Annual preventive care visit Chronic condition management 	LiveHealth Online	Monday through Friday, 9 a.m. to 9 p.m. ET Saturday and Sunday, 9 a.m. to 5 p.m. ET
Mental health <ul style="list-style-type: none"> Counseling Medication Management 	LiveHealth Online	By appointment
Prescriptions — new and refills	LiveHealth Online	Times vary based on the care or service
Dermatology	LiveHealth Online	7 days a week
Allergy Program	LiveHealth Online	By appointment



Scan this QR code with your phone's camera



5 ways to save on healthcare costs

Getting the most from your health plan starts with a few smart choices. Here are five simple ways to help lower healthcare costs for you and your family this year:

Choose doctors and facilities in your plan's network

When you use doctors and hospitals in your plan's network, you'll usually pay less. Before you schedule, check the Find Care section in the Sydney Health app to confirm they're in your plan's network.

Choose the right place for care

The ER is best for life-threatening emergencies. For most non-emergency needs, you can save money by using your primary care doctor, urgent care, or virtual care. Virtual care in the Sydney Health app lets you see a doctor by video 24/7 with a \$0 copay. If it's an emergency, call 911 or go to the ER.

Compare costs before you receive care

Prices for labs, procedures, and visits can vary. The Find Care feature in the Sydney Health app shows cost information for 700+ procedures and common office visits. You can also use SmartShopper (a free benefit) to find lower-cost, high-quality options in your area. Learn more at cova.smartshopper.com.

Stay up to date on preventive care

Annual checkups and recommended vaccines can help catch issues early—before they become more serious and more expensive. Preventive care is covered by insurance, so it's a great way to protect your health and your budget.

Stay on track with ongoing conditions

Managing chronic conditions—and taking medications as prescribed—can help you feel your best and avoid avoidable ER visits. Check the PreventiveRx Plus drug list at anthem.com/cova to see which maintenance medications may be covered with a \$0 copay.

Prescription Drugs

Your prescription drug benefits are through Anthem Pharmacy delivered by CarelonRx. It is a **mandatory generic** program which means if you or your doctor requests a brand name drug when a generic is available, you will pay for the brand copayment plus the difference between the allowable charge for the generic and the brand name drug.



No-cost Condition-related Medications

We're making it easier for you to get certain condition-related, maintenance medications at no-cost. Members who take certain medications to manage specific conditions will have a \$0 copay when they pick up their prescription at an in-network pharmacy. Covered drugs include certain types of insulin, diabetic supplies, and antidepressants, along with several other medicines that treat asthma, high blood pressure, high cholesterol, depression, COPD, and osteoporosis. Check the PreventiveRx Plus drug list on [anthem.com/cova](https://www.anthem.com/cova) to see which medications are included.

Drug Tiers

Your pharmacy benefit categorizes covered drugs into four tiers, and each tier has a specific copayment. Periodically a drug may move from one tier to another. There is a \$150 pharmacy deductible for one person or a \$300 deductible for two or more people before the plan pays for Tier 2, Tier 3, and Tier 4 drugs.

Tier 1	Generic drugs
Tier 2	Lower cost preferred brand name drugs
Tier 3	Higher cost non-preferred brand name drugs
Tier 4	High cost Specialty drugs

Retail Pharmacy

Get up to a 34-day supply of covered drugs at a network retail pharmacy. You can also get a three month supply of the drug by paying three copayments at the time of purchase. Your retail pharmacy network has more than 67,000 pharmacies across the country – including most chains and some local, independent pharmacies. To check if your pharmacy is in the network, simply ask your pharmacist, go to [anthem.com](https://www.anthem.com), or call us at **1-833-267-3108**.

When you use a network pharmacy, you pay only the applicable copayment. If you choose an out-of-network pharmacy, you'll need to pay the total cost of the drug when you pick it up, and then file a Prescription Drug Claim Form to get reimbursed. You may be responsible for the difference between the pharmacy's charge and the plan's allowable charge for the drug.

Home Delivery Pharmacy

This is a convenient, cost-saving way to get up to a 90-day supply of medications you take on a regular basis. You pay two copayments for a three-month supply of drugs, and the medication is delivered right to your home.

To get started:

By phone: Call **1-833-267-3108**. A representative will help you with your order. Have your prescription, doctor's name, phone number, drug name and strength, and credit card handy when you call.

Online: Login to [anthem.com](https://www.anthem.com) and select Pharmacy under *My Plans* to request a new prescription or refill a current prescription. Use your online Pharmacy tools to set up automatic refills, compare drug costs, and get details about medications.

Specialty Pharmacy

Specialty Home Delivery

Your pharmacy program includes access to home delivery of specialty drugs. Specialty medications include biopharmaceutical and injectable drugs.

Call **1-833-267-3108** to begin using the Specialty Home Delivery service. Provide them with your doctor's name and phone number, and they'll do all the rest.

Specialty Retail

You can also obtain your specialty drugs from a participating retail pharmacy for up to a 34-day supply, or pay three copayments for a three month supply.

Prior Authorization

(required for some prescriptions)

Most prescriptions are filled right away when you take them to the pharmacy. However, some drugs need to be reviewed before they are covered. This process is called Prior Authorization. If Prior Authorization is needed, your doctor must submit the request. A decision whether the drug will be covered is usually made within 24-48 hours from the time of the request.

It's easy to get EOBs for your pharmacy claims on [anthem.com](https://www.anthem.com)!

You can view pharmacy Explanations of Benefits (EOBs) online anytime at [anthem.com](https://www.anthem.com).

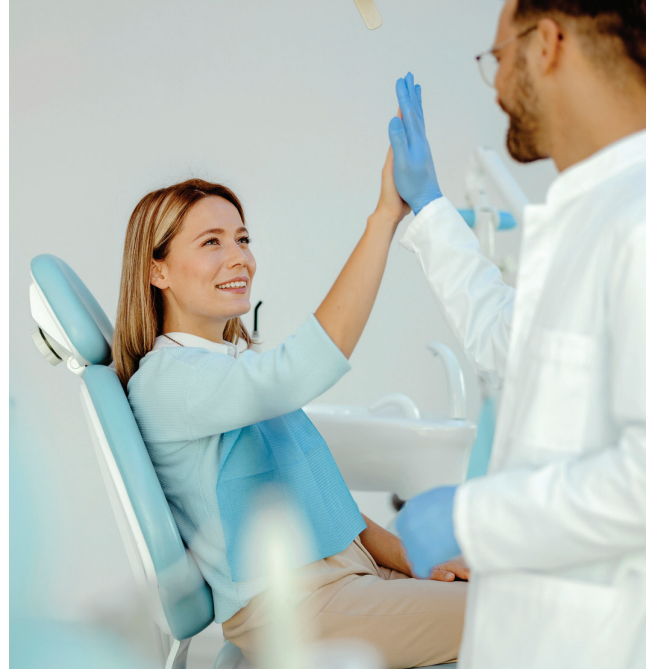
Go to [anthem.com](https://www.anthem.com) and log into your account:

- Select *Explanation of Benefits Center* under *Claims & Payments* and then select *View Pharmacy Claims* on the Pharmacy EOBs tile.
- Click on *Show details* to view claim details.
- Click on *Print Details* to print all claim details if needed.

No online access? Call **1-800-552-2682** to request a copy.

Note: If your plan does not pay anything towards your claim, you will see \$0.00 plan paid amounts listed in the *Additional Details* section and an EOB is not available.

Need help? Call Anthem Pharmacy at **1-833-267-3108**. Available 24/7/365.



Dental

Administered by Delta Dental

Routine diagnostic and preventive dental services are included in your plan with **no coinsurance or deductible** from dentists who participate in the Delta Dental PPO or Premier networks.

Coverage includes:

- Routine oral exams and cleanings, twice per plan year
- Bitewing x-rays
- Sealants and flouride for children under 19
- Full mouth or panorex x-rays once every 3 years

You may receive care outside of the network. However, you'll be responsible for paying any difference between the non-participating dentist's charges and Delta Dental's allowable charge for covered benefits.

The **Expanded Dental Option** covers primary, major and orthodontic dental care for an additional premium.

View complete details at [deltadentalva.com](https://www.deltadentalva.com)

Click on **Commonwealth of Virginia** from the home page.

- View your dental benefits booklet
- Find a dentist
- Check claims
- Learn about good oral health

Employee Assistance Program (EAP)

If you or a loved one needs help coping with life's challenges, your Employee Assistance Program (EAP) is here with support at no extra cost. You can find help for conditions such as anxiety, depression, stress, sleep problems, substance use, and family and relationship concerns.

	What it is	How to connect
Counseling	Each member of your household can have four visits with a counselor per issue, per year.*	
Counselors in your community	Confidential therapy sessions with a licensed professional counselor near home, school, or work.	For a list of counselors that are part of your EAP, visit anthem.com/cova or call 1-855-223-9277 .
Headway	Easily search for and connect with a licensed therapist or clinician that meets your individual needs. Book virtual or in-person appointments.	To get started, visit anthem.com/cova and select Find a Counselor .
Talkspace	Be matched with a licensed therapist who best suits your needs. Connect 24/7 via text chat, phone, or video — or schedule a virtual visit.	To get started, visit anthem.com/cova and select Find a Counselor .
LiveHealth Online	Select from counselors who meet your needs, schedule a video visit, and then connect with your counselor without leaving the privacy and comfort of your home.	Visit anthem.com/cova . Choose Find a Counselor and select LiveHealth Online for instructions on how to get started.
Resources		
Emotional Well-being Resources	Online programs and personalized coaching to help you work through thoughts and behaviors that affect emotional well-being. Learn ways to manage concerns like stress, anxiety, depression, and sleep issues — at no extra cost.	Log in to anthem.com/cova . Scroll down to Self-paced Courses and Resources and choose Emotional Well-being Resources .
Work-life Resources	Find resources for career, parenting, healthy communication, and balancing work and family.	Log in to anthem.com/cova and select Work-life Resources or call 1-855-223-9277 to speak with a work-life counselor.
Financial Planning	Talk with a professional and find resources that can help you take charge of your finances, including free credit monitoring and identity theft recovery.	Log in to anthem.com/cova and select Financial Planning or call 1-855-223-9277 to schedule an appointment with a financial counselor.
Legal Resources	Access online resources and legal help in-person or by phone for each issue, each year, at no added cost. You or eligible family members can call EAP and request a consultation for each separate issue, with a network attorney at no cost.	Log in to anthem.com/cova and select Legal Resources or call 1-855-223-9277 to arrange an appointment with an attorney.

* Appointments are subject to the availability of a therapist.

LiveHealth Online is offered through an arrangement with Amwell, a separate company, providing telehealth services on behalf of your health plan.

Online counseling is not appropriate for all kinds of matters. If you are in crisis or have suicidal thoughts, it's important that you seek help immediately. Call 988 to reach the 24/7 confidential 988 Suicide & Crisis Lifeline or go to [988lifeline.org](https://www.988lifeline.org). If your issue is an emergency, call 911 or go to your nearest emergency room.

Talkspace does not offer emergency services.

EAP products are offered by Anthem Insurance Companies, Inc.

Anthem Health & Wellness Programs

Your COVA Care plan includes a host of free and confidential health and wellness programs, including:

ConditionCare

Get support to manage these conditions:

- Diabetes
- Chronic obstructive pulmonary disease (COPD)
- Heart failure
- Hypertension
- Coronary artery disease (CAD)
- Asthma

You may receive a call from ConditionCare if your claims indicate you or an enrolled family member may be dealing with one or more of these conditions. You may opt in or out of the program when they call.

Health Assessment

Completing a Health Assessment is a great way to keep track of your medical history and health goals. Go to [anthem.com](https://www.anthem.com) > Login > My Health Dashboard > Programs to access My Health Check-in and possibly earn a Premium Reward.* You can also access your My Health Check-in on the Sydney Health mobile app.

Building Healthy Families

Building Healthy Families provides personalized, on-demand health support for members who are pregnant, postpartum, or raising young children. Log in to the Sydney Health app or [anthem.com](https://www.anthem.com) to access online educational articles, videos, health trackers, and personalized coaching via phone or chat. If you do not have access to the web, call **1-833-812-1776** to enroll. Expecting parents can have their hospital copayment waived by completing the following three steps before delivery:

1. Register for Building Healthy Families and complete your profile
2. Take the pregnancy screener
3. Complete one of six mini assessments within the program app

Well-Being Coach

A well-being coach can provide practical tips and tailored support to help you achieve your goals like quitting tobacco or losing weight - at no extra cost to you. Call **1-844-507-8472** to enroll or we may call you to see if you would like to participate.

Cancer Care Navigator

Cancer Care Navigators are health educators specially trained to support members undergoing cancer treatment. They work one-on-one with members to help coordinate care and act as a single point of contact for their cancer providers reducing the burden on the member and caregivers. Cancer Care Navigators connect members and their loved ones to community resources and answer questions about benefits, treatments, medications, and side effects. Navigators will reach out to eligible members who might benefit from their assistance.

Community Connected Care

Community Connected Care links you with local resources for help with everyday living and health concerns. Trained, local care coordinators can get you support for transportation, housing, food, medication costs, and more. It's free, easy and discreet. Connect with someone who can help by visiting groundgame.health/anthem.

Additional Wellness Programs

These programs are free for covered members and are accessible through these individual service providers.

Hello Heart - A digital heart health program that helps eligible members track blood pressure and better understand how daily habits impact heart health using an easy-to-use app. Members who qualify receive a Hello Heart blood pressure monitor at no cost. Visit <https://preferences.helloheart.com/COVA> to get started.

Virta - An online health program that helps you improve your metabolic health through simple changes to what you eat. You will work with a care team, including medical providers and health coaches, who support you and track your progress from home. Many members see real health improvements and may lower their use of some medications over time. Visit go.virta.com/cova.

Hinge Health - A virtual physical therapy program that can help reduce everyday joint and muscle aches, recover from an injury, and relieve pelvic pain and discomfort. Get personalized care with a

*Additional requirements apply. Visit <https://www.dhrm.virginia.gov/> to learn about Premium Rewards.

dedicated team via the Hinge Health app, offering tailored plans, quick exercise sessions, and easy communication. Visit hinge.health/cova for details.

Catapult Health – Catapult Health’s VirtualCheckup® combines simple at-home testing with a face-to-face video consultation with a licensed healthcare provider, all done at a time and location of your choice. Test results are reviewed and sent to your PCP, and a Personal Action Plan is developed for you. Visit <https://signup.virtualcheckup.com/COVA26-Benefit> to learn more.

Go Paperless Today

Going paperless helps you stay up to date—without waiting for mail. Once you switch, you can view plan documents like your ID card and Explanation of Benefits (EOB’s) securely on your phone or laptop as soon as they’re available. We’ll send a notice to the email address you choose.

How to switch to paperless:

- Log in to Sydney Health or anthem.com.
- Go to Profile (in Sydney Health, type Profile in chat; on anthem.com, select Profile in the top right).
- Under My Account, select Communications & Settings.
- Confirm your email address is correct.
- Under Customize Going Digital, choose Email for the messages you want.
- To go fully paperless (including ID cards), turn Go 100% Digital on.

Earn Rewards for Getting Better Care

When considering where to get care, it pays to do your research. Your plan includes SmartShopper, an easy-to-use tool that helps you save money and earn cash rewards. Before making an appointment, check SmartShopper to compare costs for common medical care. Use the website or contact the Care Concierge Team to compare providers, prices, and reward amounts. When you select a provider with a reward listed, you’ll receive a check for that amount within six to eight weeks. SmartShopper can even help you schedule appointments, validate procedure referrals with your doctor, and obtain pre-authorizations - making it easy to save and earn rewards.

To access SmartShopper visit <https://cova.smartshopper.com/> or call the Care Concierge Team at **1-844-277-8991**



Quick Access to Your Plan

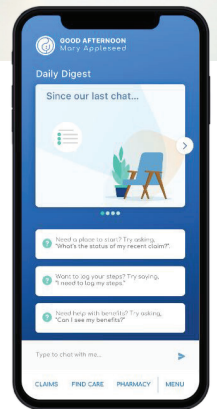
Anthem.com/cova

Your dedicated website for health benefits documents, no log in needed

- Download your health benefits summary and member handbook
- Learn about your Employee Assistance Program (EAP)

Log in to the Sydney Health mobile app or Anthem.com to:

- Easily chat with customer service
- See medical and pharmacy benefits in one place
- Compare costs of labs, procedures and doctors
- Find high-quality doctors or specialists in your plan and near you
- Connect easily to virtual care
- Download the app and get started!



Scan this QR code with your phone's camera



Optional Benefits

(offered for an additional premium)

1. Expanded Dental Option

Benefits offered in addition to the diagnostic and preventive dental benefits included in the basic COVA Care plan

Administered by Delta Dental

Plan Year Maximum Benefit - per member (except Orthodontic)	\$2,000
Plan Year Deductible	\$50 One person / \$100 Two people / \$150 Family (three or more people)
	In Network You Pay
Primary Fillings and other restorative services Root canal and other endodontic services Simple extractions and other minor surgical procedures Periodontic services Denture repair and recementation of crowns, bridges and dentures	20% after deductible
Major Dental Care Crowns (single crowns, inlays and onlays) Prostodontics (partials or complete dentures and fixed bridges) Dental implants	50% after deductible
Orthodontic (\$2,000 lifetime maximum benefit per member) Removable and fixed appliance therapy and comprehensive therapy for adults and children	50%, no deductible

Out-of-network benefits are included.

2. Expanded Vision & Hearing Option

Blue View Vision

In-Network. Your routine vision benefit uses the Blue View Vision network, offering a wide selection of ophthalmologists, optometrists and opticians. The network also has convenient retail locations, including 1-800 CONTACTS, LensCrafters®, Target Optical®, and ContactsDirect.com.

Out-of-Network. You may also choose to receive care outside of the Blue View Vision network. You simply get an allowance toward covered services and you pay the rest. Pay in full at the time of service and then file a Blue View Vision out-of-network claim form for reimbursement.

Expanded Routine Vision Option (once per plan year)	In Network You Pay
Routine Eye Exam	\$15 copayment (Covered under the basic plan)
Eyeglass Frames¹	80% of balance after plan pays \$100 allowance
Standard Single Vision Eyeglass Lenses (Polycarbonate lenses included for children under 19 years old)	\$20 copayment

Expanded Routine Vision Option (once per plan year)	In Network You Pay
Contact Lenses (instead of eyeglass lenses)	
Elective Conventional Lenses ²	85% of balance after plan pays \$100 allowance
Elective Disposable Lenses ²	Balance after plan pays \$100 allowance
Non-Elective Lenses ³	Covered in full
Contact Lens Fitting and Follow-up (Up to 2 follow-up visits. Initial fitting must occur during the eye exam in order to be covered.)	<ul style="list-style-type: none"> • Up to \$55 for Standard Contact Lens⁴ Fitting • 90% of retail price for Premium Contact Lens⁵ Fitting
Additional Discounts (See your COVA Care member handbook for coverage of eyeglass lens upgrades and savings on eyewear accessories.)	<ul style="list-style-type: none"> • 60% of retail price for additional pair of Eyeglasses (unlimited number) • 85% of retail price for Conventional Contact Lenses

¹ Discount not available on frame brands in which manufacturer has a no discount policy.

² Elective contact lenses are in lieu of eyeglass lenses.

³ Non-Elective contact lenses covered when eyeglasses are not an option for vision correction.

⁴ Standard contact lens fitting includes spherical clear contact lenses for conventional wear and planned replacement.

⁵ Premium contact lens fitting includes all lens designs, materials and specialty fittings other than standard contact lenses. Examples include toric and multifocal lenses.

Hearing Option	You Pay
Routine hearing exam (once per plan year)	\$40 copayment
Hearing aids and other hearing aid related services (once every 48 months)	Balance after plan pays maximum of \$1,200

3. Out-of-Network Option

Consider this option if you plan to see a provider who is not in the Anthem PPO or the BlueCard PPO network for care in the U.S. Covered services received outside of the network are paid at the in-network level less a **25% reduction** in the amount paid by your plan. The 25% reduction does not count toward your Out-of-Pocket expense limit.

Example: Out-of-network PCP Doctor Visit

Plan allowable charge for visit	\$100.00
Minus \$25 copayment	– \$ 25.00
	= \$ 75.00
25% reduction	– \$ 18.75
What Plan pays after 25% reduction	\$ 56.25
Total amount you pay	\$ 43.75

Plus, the out-of-network provider may bill you for any amount above the allowable charge.



Who to Contact for Assistance

Anthem Health Guide (Member Services)	1-800-552-2682 anthem.com/cova
Anthem Behavioral Health and Employee Assistance Program (EAP)	1-855-223-9277 anthemeap.com/cova
Anthem Health & Wellness Programs	anthem.com > Login > My Health Dashboard > Programs
Anthem ID Card Order Line	1-866-587-6713
Anthem Pharmacy	1-833-267-3108 anthem.com
BlueCard PPO (coverage outside Virginia)	1-800-810-2583 bcbs.com
Blue Cross Blue Shield Global Core (coverage outside of the U.S.)	1-800-810-2583 bcbsglobalcore.com
Delta Dental	1-888-335-8296 deltadentalva.com
Virtual Care Options including LiveHealth Online	Sydney Health App or anthem.com/cova
Department of Human Resource Management (DHRM)/ Commonwealth of Virginia	dhrm.virginia.gov

Eligibility questions? If you have questions about eligibility for the state health benefits program, please contact your agency Benefits Administrator for further information.



Language Access Services - (TTY/TDD: 711)

(Spanish) - Tiene el derecho de obtener esta información y ayuda en su idioma en forma gratuita. Llame al número de Servicios para Miembros que figura en su tarjeta de identificación para obtener ayuda.

(Korean) - 귀하에게는 무료로 이 정보를 얻고 귀하의 언어로 도움을 받을 권리가 있습니다. 도움을 받으려면 귀하의 ID 카드에 있는 회원 서비스 번호로 전화하십시오.

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Sydney Health is offered through an arrangement with Carelton Digital Platforms, a separate company offering mobile application services on behalf of your health plan.

Carelton Health, Inc is a separate company providing care management services on behalf of Anthem Blue Cross and Blue Shield.

Catapult Health, LLC is a separate company providing virtual health assessments in connection with your health plan.

Hello Heart, Inc. is a separate company providing cardiovascular health support programs in connection with your health plan.

Virta Health is a separate company providing diabetes management and weight loss programs in connection with your health plan.

Hinge Health, Inc. is a separate company providing musculoskeletal care in connection with your health plan.

LiveHealth Online is offered through an arrangement with Amwell, a separate company, providing telehealth services on behalf of your health plan.

PCHP, LLC dba GroundGame Health is a separate company providing care coordination and support services on behalf of your health plan.



Commonwealth of Virginia