Dear Member:

Please read the enclosed Notification of Changes to Your Member Handbook. It describes changes in your COVA Care coverage for the plan year beginning July 1, 2012. Your COVA Care Member Handbook including this update may be found at www.dhrm.virginia.gov.

Thank you.

T20842 (7/2012)
COVA Care
Commonwealth of Virginia Health Benefits Program
Notification of Changes to Your COVA Care Member Handbook – July 2011
Effective July 1, 2012

Keep this notification with your COVA Care Member Handbook. This notification, along with the previous notification, and your member handbook constitute a full and complete description of your coverage. You also may view or download the COVA Care Member Handbook including this update from the DHRM Web site at www.dhrm.virginia.gov.

I. PROFESSIONAL SERVICES (Page 39)
Administered by Anthem Blue Cross and Blue Shield (Blue View Vision network)

Services Which Are Eligible for Reimbursement

3) Treatment of morbid obesity

Incentive:
If you decide to seek bariatric surgery, your COVA Care plan will waive the facility copayment of $300 for the inpatient hospital stay, or $125 for the outpatient visit. You will receive a letter from ValueOptions upon completion of the 12-month pre-surgery program that provides instructions.

II. BEHAVIORAL HEALTH SERVICES AND EMPLOYEE ASSISTANCE PROGRAM (EAP) (Page 44)
Administered by ValueOptions®, Inc.

Services Which Are Eligible for Reimbursement

4) Autism Spectrum Disorder (ASD) including Applied Behavior Analysis (ABA) for ages 2 through 6 years.

Autism Spectrum Disorder means any pervasive developmental disorder, including Autistic Disorder, Asperger’s Syndrome, Rett Syndrome, Childhood Disintegrative Disorder, or Pervasive Development Disorder.

Applied Behavior Analysis is an educational component of ASD, which may include the design, implementation and evaluation of environmental modifications, using behavioral stimuli to produce socially significant improvement in human behavior, including the use of direct observation, measurement, and functional analysis of the relationship between environment and behavior.

Conditions for Reimbursement

4) ABA services for the treatment of a member diagnosed with ASD must be defined in a treatment plan from a licensed physician or a licensed psychologist who determines the care to be medically necessary. In addition, the service must be provided or supervised by a board certified behavior analyst who is licensed.
by the Board of Medicine. The prescribing practitioner shall be independent of the provider of ABA.

**Special Limits**

2) ABA services for ASD are covered for children ages 2 through 6 with a $35,000 annual limit on services.

**Member Pays**

ABA services $25 per provider group per day for in-network providers

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**III. THERAPY SERVICES** (Page 51)

*Administered by Anthem Blue Cross and Blue Shield*

**Member Pays**

IV or *injected cancer drugs* 20% coinsurance after deductible (chemotherapy)

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**IV. ROUTINE VISION** (Page 72)

*Administered by Anthem Blue Cross and Blue Shield (Blue View Vision network)*

**Special Limits**

1) Optional Routine Vision (Blue View Vision) is available *once every 12 months*, instead of once every 24 months. This includes the routine vision examination, eyeglass frames and lenses.

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**V. PROGRAMS INCLUDED IN YOUR HEALTH PLAN** (Page 80)

**ConditionCare**

The ConditionCare disease management program offers an *incentive for members under treatment for diabetes* who meet certain criteria.

Diabetic members participating in Anthem’s Condition Care program are eligible to receive Tier 1 and Tier 2 diabetes medication and supplies at no cost through the outpatient pharmacy benefit administered by Medco. Diabetes supplies covered at no cost to you include Tier 1 and Tier 2 blood glucose test strips, needles, syringes, and lancets. The program helps members follow their treating provider’s plan of care to improve their quality of life by achieving better health.

To receive the incentive, you must:

1. Participate in the ConditionCare program if you are contacted.
2. Have an annual wellness visit with your PCP or family practitioner.
3. Have an annual A1C test.
4. Be compliant with your diabetic drugs as prescribed by your doctor. To be eligible for the incentive you must be compliant for 90 days; continued eligibility requires continued compliance.