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To: Extended Coverage/COBRA Qualified Beneficiaries in the Commonwealth of Virginia
Health Benefits Program

From: Office of State and Local Health Benefits Programs

Date: April 3, 2023

Subject: ANNUAL OPEN ENROLLMENT May 1-15, 2023

Your Annual Open Enrollment

Your Open Enrollment will take place from May 1 through May 15. During this time, you can make changes to your Extended Coverage/COBRA health plan and membership level if you continue to be eligible for coverage (changes must comply with eligibility criteria). Open Enrollment changes will be effective July 1, 2023, the start of the new plan year. This booklet includes information about coverage options and changes to existing plans in the new plan year. The 2023 **Benefits-At-A-Glance** provides an overview of benefit coverage for each plan.

If you wish to maintain your current plan and do not plan to participate in Premium Rewards, NO ACTION on your part is necessary.

Change in COBRA Administration

PayFlex Systems USA, Inc. will serve as the new COBRA Administrator effective July 1, 2023. This is a change in Administration only! Your current coverage will continue with the same health plan carriers. Further details will be forthcoming in the mail soon.

**NOTE: PREMIUMS AND PLAN BENEFITS INCLUDED IN THIS BOOKLET
MAY CHANGE SUBJECT TO FINAL STATE BUDGET APPROVAL**

Your Monthly Premiums Starting July 1, 2023

The following chart includes your plan choices and associated premiums for the new plan year starting July 1, 2023. The shaded premiums are eligible for reduction by earning a Premium Reward as explained below.

18 or 36-Monthly Extended Coverage/COBRA Participants

	Single	Two person	Family
COVA Care (with preventive dental)	\$851.70	\$1,574.88	\$2,285.82
COVA Care + Out-of-Network	\$872.10	\$1,611.60	\$2,339.88
COVA Care + Expanded Dental	\$885.36	\$1,637.10	\$2,376.60
COVA Care + Out-of-Network + Expanded Dental	\$905.76	\$1,673.82	\$2,430.66
COVA Care + Expanded Dental + Vision and Hearing	\$905.76	\$1,673.82	\$2,430.66
COVA Care + Out-of-Network + Expanded Dental + Vision & Hearing	\$926.16	\$1,710.54	\$2,483.70
COVA HealthAware (with preventive dental)	\$754.80	\$1,400.46	\$2,025.72
COVA HealthAware + Expanded Dental	\$787.44	\$1,460.64	\$2,113.44
COVA HealthAware + Expanded Dental & Vision	\$798.66	\$1,482.06	\$2,144.04
COVA HDHP (with preventive dental)	\$638.52	\$1,189.32	\$1,738.08
COVA HDHP + Expanded Dental	\$672.18	\$1,250.52	\$1,827.84
Kaiser Permanente HMO*+ Dental & Vision	\$833.34	\$1,531.02	\$2,231.76
Optima Health Vantage HMO* + Dental & Vision	\$829.26	\$1,535.10	\$2,222.58

29-Month (11-Month Disability Extension) Extended Coverage/COBRA Participants

	Single	Two person	Family
COVA Care (with preventive dental)	\$1,252.50	\$2,316.00	\$3,361.50
COVA Care + Out-of-Network	\$1,282.50	\$2,370.00	\$3,441.00
COVA Care + Expanded Dental	\$1,302.00	\$2,407.50	\$3,495.00
COVA Care + Out-of-Network + Expanded Dental	\$1,332.00	\$2,461.50	\$3,574.50
COVA Care + Expanded Dental + Vision and Hearing	\$1,332.00	\$2,461.50	\$3,574.50
COVA Care + Out-of-Network + Expanded Dental + Vision & Hearing	\$1,362.00	\$2,515.50	\$3,652.50
COVA HealthAware (with preventive dental)	\$1,110.00	\$2,059.50	\$2,979.00
COVA HealthAware + Expanded Dental	\$1,158.00	\$2,148.00	\$3,108.00
COVA HealthAware + Expanded Dental & Vision	\$1,174.50	\$2,179.50	\$3,153.00
COVA HDHP (with preventive dental)	\$939.00	\$1,749.00	\$2,556.00
COVA HDHP + Expanded Dental	\$988.50	\$1,839.00	\$2,688.00
Kaiser Permanente HMO*+ Dental & Vision	\$1,225.50	\$2,251.50	\$3,282.00
Optima Health Vantage HMO* + Dental & Vision	\$1,219.50	\$2,257.50	\$3,268.50

*Kaiser Permanente HMO and Optima Health Vantage HMO are only available to participants living in the plans' defined services areas. If you enroll in one of these plans but do not live in the service area, you will be required to change plans. Contact Kaiser or Optima directly for specific information—see *Who to Contact* on page 12.

Earn Premium Rewards

If you are enrolled in either COVA Care or COVA HealthAware Plan during the new plan year, you can reduce your monthly premium by completing a health assessment. Your monthly premium cost will be reduced by \$17 per month when the requirement is met by the Enrollee, and \$34 per month if the requirement is also met by an enrolled spouse.

Eligible participants must complete/update and submit their online health assessment between May 1–15 to earn a reward starting July 1. Health assessments submitted before May 1, 2023, **will not count for the new plan year**. Be sure to keep a copy of your confirmation. **If this requirement is not completed, any existing premium reward will end on June 30, 2023.** Visit your plan's website or mobile app to access your health assessment.

Remember, you must be active and enrolled in COVA Care or COVA HealthAware to be eligible for a reward. Enrolled COBRA participants and their spouses must register with a separate account to submit a health assessment. Current COVA Care or COVA HealthAware members who may be changing their plans for July 1, 2023, will need to complete their assessment with their current health plan administrator.

To earn a reward BEGINNING July 1, 2023:

How to Access the Health Assessment

COVA Care Members

Online

- Log in to www.anthem.com
- Select "**My Health Dashboard**" from the top navigation menu.
- Select "**Programs**".
- Under "**Additional Programs**", select "**Learn more**" on the WebMD Health Risk Assessment tile.
- Click "**Start your assessment**"; then click "**Take it again**" if you have previously completed an assessment.
- After completing your assessment, click on the "**Save and finalize**" button, then answer three questions and click "**Save and continue**".
- Answer the feedback questions, then click "**Finish**". Be sure to print your confirmation page or save a screenshot for your records.

Sydney Health mobile app

- Log in to the Sydney Health app, from the welcome screen click **“Menu”** on the bottom right.
- Select **“My Health Dashboard”** from the menu list.
- Scroll down to the **“Featured Programs section”**, then click **“View All”**, then click on the **“WebMD Health Risk Assessment”** tile.
- Click **“Start your assessment”**; then click **“Take it again”** if you have previously completed an assessment.
- Click on the **“Save and finalize”** button, then answer three questions, then click **“Save and continue”**.
- Answer the feedback questions, then click **“Finish”**. Be sure to print your confirmation page or save a screenshot for your records.

Note: As a first time user, you will need to download the *Sydney Health* mobile app from either Google Play or Apple app store. Once you have completed the registration, follow the above instructions for accessing the Health Assessment.

COVA HealthAware Members

Online

- Log in to www.aetna.com
- Scroll down until you see **“Member Resources”** on the right side of the page and click on **“Well-being Resources”** in this section to open your Member Engagement Platform.
- Once the Member Engagement Platform opens, hover over **“My Health”** in the menu at the top and then click on **“Health Assessment”**.

Aetna Health mobile app

- Log in to the Aetna Health mobile app.
- Select the **“Improve”** tab.
 - When accessing this tab for the first time, select **“Get Started”**.
 - When accessing this tab after the first time, select **“Health Survey”**.

The Aetna website and the Aetna Health app will experience a system outage from Saturday, May 13, 2023 at 4:00pm EST through Sunday, May 14, 2023 at 12:00 noon EST. Please plan accordingly.

To earn a reward to start AFTER July 1, 2023:

Eligible COBRA Enrollees and their covered spouses that do not complete a health assessment during the Open Enrollment timeframe, can still complete and submit the health assessment at any time during the plan year. For more information on earning a Premium Reward after July 1, 2023, visit <https://www.dhrm.virginia.gov/employeebenefits/health-benefits/extended-coverage> and see the Premiums and Premium Rewards section.

BENEFIT CHANGES FOR JULY 1, 2023

Focus for 2023-24 – More \$0 Member Cost Share Options

You will find that most of the benefit changes being offered, provide more \$0 options to help you and your family save on out-of-pocket costs. Changes are effective on July 1, 2023.

COVA Care and COVA HDHP

Diabetes Prevention Program (DPP)

A personalized digital health coaching solution powered by Lark, that leverages artificial intelligence, cognitive behavioral therapy, and smart connected devices to lower risk for type 2 diabetes. Eligible members will be invited to participate in this 12-month program which has been shown to lower a person's risk for type 2 diabetes by 60%. Once a member is found eligible and enrolls in the program, they will receive a link to download the Lark app.

Program participants receive instant, unlimited, individualized text-based coaching and daily education on prediabetes and how to avoid progression to diabetes. Participants can work towards goals directly tied to weight management such as healthy eating, physical activity, stress management, and improved sleep. After achieving specific program milestones, participants receive free weight management tools to help track their weight so they can adopt lifelong healthy behaviors. There is **no cost** to participate for both COVA Care and COVA HDHP members.

Find out more and see if you are eligible by logging into the Sydney Health app.

Expanded Virtual Care through the Sydney Health app

We're making it easier for you to get the care you need. New this year, you can take advantage of virtual video visits for **primary care, preventive care, and chronic condition management** using the Sydney Health app. Use virtual visits when you need **condition-related care plans, prescriptions, preventive tests, labs, and referrals.**

You can also use the Sydney Health app when you are feeling sick. Log in to **check symptoms** or use **secure in-app medical text chat** to connect 24/7 to urgent care doctors that can treat many common health concerns like colds, flu, sinus infections, sore throat, allergies, pink eye, and stomach ailments.

Access all your virtual care options by logging into the Sydney Health app and clicking on the Care icon at the bottom of the screen.

There is a **\$0 member cost** share for COVA Care members. COVA HDHP members pay 20% coinsurance after the deductible is met.

LiveHealth Online – Dermatology

LiveHealth Online now offers the convenience of visiting a dermatologist online, 24 hours a day, 7 days per week, without an appointment. Commonly treated conditions include acne, athlete's foot, eczema, hair loss, insect bites, rash, suspicious moles, etc.

LiveHealth Online video visits continue to be available 24/7 for urgent care and dermatologists, and by appointment for mental health and sleep specialists. Access LiveHealth Online via the Sydney Health app or by going to anthem.com/cova or livehealthonline.com.

There is a **\$0 member cost** share for COVA Care members. COVA HDHP members pay 20% coinsurance after the deductible is met.

In-Home Addiction Treatment/I-HAT

An innovative in-home drug and alcohol addiction treatment program that provides a multi-disciplinary rehabilitation team to teach individuals new skills and daily habits so they can develop proper coping mechanisms to overcome the social aspects of their addiction as they work, live, and thrive while recovering – in the comfort and privacy of the communities where they live. The member cost of this treatment is the same as other Outpatient Treatment services.

COVA HealthAware

MinuteClinic Visits

The care you need – In person or Virtually.

You can access covered MinuteClinic Services at **no cost to you**. With your included MinuteClinic benefit in your plan, healthier happens together. You get more options for where and when you get care.

MinuteClinic is a walk-in clinic inside select CVS Pharmacy and Target stores and is the largest provider of retail health care in the United States, making it easy to access care in your neighborhood.

- Get care 7 days a week, including evenings, so you can feel better faster.
- Choose in-person and virtual care options to easily access care your way.
- Treat a variety of conditions, illnesses and injuries including:
 - Asthma and allergies
 - Bronchitis and upper respiratory infections
 - Insect stings
 - Diabetes
 - Sore throats and ear infections
 - Minor cuts, blisters and wounds

Teladoc Dermatology

Personalized online reviews for new or ongoing skin issues.

Don't wait weeks for a dermatology appointment. Start a virtual consult anytime with one of Teladoc's U.S. board-certified dermatologists, at **no cost to you**. In 24 hours or less, you'll get a diagnosis, customized treatment plan and prescriptions if needed.

Teladoc's virtual dermatologists can diagnose and treat thousands of skin conditions, including:

- Acne
- Dermatitis
- Eczema
- Herpes
- Poison ivy
- Psoriasis
- Rash
- Rosacea
- Skin infections
- And more

To access, log into your Teladoc account via the Teladoc app or online at www.teladoc.com/aetna.

COVA Care, COVA HDHP and COVA HealthAware

Pharmacy Formulary – CarelonRx (Anthem’s Pharmacy Benefits Manager) will be transitioning to the National 4-Tier Drug List. **Only impacted members will receive a direct communication with additional details.**

Health and Wellness Programs

Helping you manage certain health conditions by providing support when you need it most. COVA Care, COVA HealthAware and COVA HDHP plans include a host of free and confidential health and wellness programs. Some of these programs offer incentives to enrolled health plan members.

These voluntary programs help you and your family on the journey to improved health and wellness. Incentives are an added bonus to help you save money.

Program	Program Details	Incentives
Medication and Health Coaching Incentives <ul style="list-style-type: none"> • Hypertension • Diabetes • Asthma • Chronic Obstructive Pulmonary Disease/COPD 	Members who enroll and work with a nurse coach, have appropriate exams or tests at certain times, and meet other program requirements.	COVA Care and COVA HealthAware members can receive certain medications and supplies at no cost for the conditions listed.
Maternity Management <ul style="list-style-type: none"> • Future Moms (Anthem) • Aetna Maternity Program 	Provides pre- and post-natal support and access to a nurse coach. Other maternity support specially designed to help expectant mothers have healthy pregnancies and healthy babies.	Expectant members must enroll within the first 16 weeks of pregnancy, actively participate, and complete a 28-week health assessment to earn: <ul style="list-style-type: none"> • COVA Care: \$300 hospital copay waiver • COVA HealthAware: \$300 hospital Health Reimbursement Arrangement (HRA) incentive

See the Member Handbook and contact the specific health plan for additional information.

COVA HDHP members may participate in programs; however, incentives are not available.

You may also find information on similar programs for Kaiser Permanente and Optima Health Vantage HMO on their respective websites.

Shared Savings Incentive Programs

COVA Care, COVA HDHP and COVA HealthAware members are eligible for the Shared Savings Program. The Shared Savings Incentive programs offer cash rewards to members when they shop for better-value healthcare services and select lower-cost options when available. Program participation is voluntary and could decrease your out-of-pocket costs and

earn you a cash reward. See the Member Handbook and contact the specific health plan for additional information.

- SmartShopper – COVA Care and COVA HDHP
- Informed Rewards – COVA HealthAware

Making Open Enrollment Changes

To make a plan or membership change during Open Enrollment, you must complete an *Extended Coverage/COBRA Change Request* form. The completed form must be mailed to the following address and **postmarked no later than May 15, 2023**, to be accepted:

**Office of Health Benefits COBRA Administrator
101 North 14th Street, 13th Floor
Richmond, VA 23219**

Forms are available at the Department of Human Resources Management website at www.dhrm.virginia.gov or by calling 1-888-642-4414.

You must complete an Extended Coverage/COBRA Change Request Form to facilitate any Open Enrollment change. Online enrollment is not available.

Once an election is made, it will not be changed except as allowed under the policies of the Department of Human Resource Management and applicable law. After the Open Enrollment Period ends, you may not revise your Open Enrollment election because you changed your mind or you completed the form incorrectly.

If you are submitting an *Extended Coverage/COBRA Change Request* form to make an Open Enrollment change to be effective July 1, 2023, be sure to check the Open Enrollment box as the reason for making the change.

Making Changes After Open Enrollment – After the Open Enrollment period, membership changes will only be allowed based on the occurrence of a consistent life event/qualifying mid-year event (such as marriage or birth of a child). The change must be made within 60 days of the event. Any increase in membership level will require documentation to support the addition of new family members.

Other News and Information. . .

Member Handbooks – Your Member Handbook is Online!

Health Plan Member handbooks are posted on the DHRM website at <https://www.dhrm.virginia.gov/employeebenefits/health-benefits/extended-coverage>. Be sure to review your plan's member handbook and associated amendments for more details on your plan. If you are enrolled in a regional plan, please visit your plan's website for the Evidence of Coverage (EOC).

How to get a copy of the Summary of Benefits and Coverage (SBC)

The Summary of Benefits and Coverage (SBC) for each plan, which summarizes important information about health coverage options in the standard format is available on the Department of Human Resource Management's website at

<https://www.dhrm.virginia.gov/employeebenefits/health-benefits/summary-of-benefits>.

Paper copies of the SBCs are available, free of charge, by emailing ohb@dhrm.virginia.gov.

IMPORTANT! If You Become Entitled to Medicare or Start Coverage Under Another Group Health Plan

The Extended Coverage/COBRA provisions of the Public Health Service Act provide that continuation coverage will be terminated before the end of the maximum coverage period if a Qualified Beneficiary becomes covered under another group health plan or if a Qualified Beneficiary becomes entitled to Medicare benefits (under Part A, Part B or both) after electing continuation coverage. It is the obligation of the Qualified Beneficiary to notify the Office of Health Benefits (OHB) COBRA Administrator in writing within 30 days of the start of such coverage. Upon reporting these events, coverage will be terminated. Failure to report other coverage within the 30-day time limit will not preclude termination back to the date the coverage would have been terminated had it been reported on time.

Prompt Payment of Premiums – Extended Coverage premium payments are due on the first day of the coverage month; however, by law, participants are given a grace period of 30 days to make each periodic payment. If the premium payment is not received by the first day of the coverage month, coverage will be suspended and then retroactively reinstated when the premium is paid. This means that any claim you submit for benefits while your coverage is suspended may be denied, but it may be resubmitted once your coverage is reactivated upon receipt of payment.

If you fail to make your premium payment by the end of the grace period, you will lose all rights to continuation coverage effective the first of the month for which payment was not received. Payments are considered made when mailed.

Address Changes – **Was this package forwarded to you from an old address?** If so, be sure to contact the Office of Health Benefits Extended Coverage/COBRA Administrator (see below) immediately to make an address correction.

If You Need Help - Extended Coverage/COBRA qualified beneficiaries should contact the Office of Health Benefits Extended Coverage/COBRA Administrator with questions regarding Open Enrollment or about eligibility and administrative issues at:

Office of Health Benefits Extended Coverage/COBRA Administrator
101 North 14th Street, 13th Floor
Richmond, VA 23219
888-642-4414

Questions regarding claims should be directed to your plan's customer service contact (see page 12).

Enclosures:

- **Important Notices Summary**
- **CHIP Notice**
- **Language Assistance Notice**

2023 BENEFITS AT A GLANCE

Health Plans	COVA Care	COVA HealthAware	COVA HDHP	Kaiser Permanente	Optima Health
Benefits	You Receive	You Receive	You Receive	You Receive	You Receive
Health Reimbursement Arrangement (HRA) Employer deposit to your HRA on July 1, 2023	Not available	\$600 employee \$600 enrolled spouse	Not available	Not available	Not available
In-Network Benefits	You Pay	You Pay	You Pay	You Pay	You Pay
Deductible – per plan year					
· One person	\$300	\$1,500	\$1,750	None	\$150
· Two or more persons	\$600	\$3,000	\$3,500	None	\$300
Out-of-pocket expense limit – per plan year					
· One person / Two or more persons	\$1,500 / \$3,000	\$3,000 / \$6,000	\$5,000 / \$10,000	\$1,500 / \$3,000	\$1,500 / \$3,000
Doctor's visits (in person and telemedicine)					
· Primary care physician	\$25	20% after deductible	20% after deductible	\$25	Tier 1: \$5 / Tier 2: \$25
· Telehealth physician visit	\$0 Sydney Health app and livehealthonline.com	\$0 www.teladoc.com/aetna	20% after deductible Sydney Health app and www.livehealthonline.com	\$0 www.kp.org • 1-800-777-7904	\$0 MDLIVE 866-648-3638
· Specialist	\$40	20% after deductible	20% after deductible	\$40	Tier 1: \$10 / Tier 2: \$40
Hospital services					
· Inpatient / Outpatient	\$300 per stay / \$125 per visit	20% after deductible	20% after deductible	\$300 per admission / \$75 per visit	\$300 per admission / \$125 per visit
Emergency room visits	\$150 per visit (waived if admitted)	20% after deductible	20% after deductible	\$75 per visit (waived if admitted)	\$150 per visit (waived if admitted)
Ambulance travel	20% after deductible	20% after deductible	20% after deductible	\$50 per service	Non-Emergency - 20% after deductible Emergency - \$150
Outpatient diagnostic laboratory and x-rays	20% after deductible	20% after deductible	20% after deductible	\$0 lab, pathology, shots, radiology, diagnostic tests \$75 specialty imaging	20% after deductible
Infusion services (includes IV or injected chemotherapy)	20% after deductible	20% after deductible	20% after deductible	\$25 PCP \$40 specialist	\$40 copay per office visit \$100 copay for pre-authorized Injectable/Infused Medications
Outpatient therapy visits					
· Occupational and speech therapy	\$25 PCP/\$35 specialist	20% after deductible	20% after deductible	\$40 (30 visits/episode)	\$25*
· Physical therapy only	\$15	20% after deductible	20% after deductible	\$40 (30 visits/episode)	\$25*
· Physical therapy and other related services, including manual intervention & spinal manipulation	\$25 PCP/\$35 specialist	20% after deductible	20% after deductible	\$40 (30 visits/episode)	\$25*
· Chiropractic services (30-visit plan year limit per member)	\$25 PCP/\$35 specialist	20% after deductible	20% after deductible	\$40	\$35
Autism spectrum disorder treatment and related services	\$25 per service/ \$40 specialist	20% after deductible	20% after deductible	\$25 per service/ \$40 specialist	PCP Tier 1: \$5 Tier 2: \$25 Specialist Tier 1: \$10 Tier 2: \$40
Behavioral health					
· Medical and non-medical professional visits	\$25	20% after deductible	20% after deductible	\$12 group/\$25 individual	\$10
· Inpatient residential treatment	\$300 per stay	20% after deductible	20% after deductible	\$300 per admission	\$300 per admission
· Intensive outpatient treatment (IOP)	\$125 per episode of care	20% after deductible	20% after deductible	\$12 group/\$25 individual	\$125
Employee Assistance Program (EAP) Up to 4 visits per incident	\$0	\$0	\$0	\$0	\$0
Prescription drugs – mandatory generic					
Retail Pharmacy	Up to 34-day supply \$15/\$30/\$45/\$55	20% after deductible	20% after deductible	Up to 30-day supply KP center: \$15/\$25/\$40 Specialty: 50%, \$75 max Community participating: \$20/\$45/\$60 (3x copayment for 90 days)	Up to 30-day supply \$15/\$30/\$45/\$55
Home Delivery Pharmacy	Up to 90-day supply \$30/\$60/\$90/\$110	20% after deductible	20% after deductible	\$13/\$23/\$38 (2x copayment for 90 days)	Up to 90-day supply \$30/\$60/\$90/\$55**

*Occupational and Physical therapy are limited to a maximum combined benefit of 30 visits per plan year. Speech therapy is limited to a maximum of 30 visits per plan year.

**30-day supply for Specialty Tier 4.

2023 BENEFITS AT A GLANCE

Health Plans	COVA Care	COVA HealthAware	COVA HDHP	Kaiser Permanente	Optima Health
In-Network Benefits	You Pay	You Pay	You Pay	You Pay	You Pay
Wellness & Preventive Services					
· Office visits at specified intervals, immunizations, lab and x-rays	\$0	\$0	\$0	\$0	\$0
· Annual check-up visit (primary care physician or specialist), immunizations, lab and x-rays	\$0	\$0	\$0	\$0	\$0
· Routine gynecological exam, Pap test, mammography screening, prostate exam (digital rectal exam), prostate specific antigen (PSA) test, and colorectal cancer screening	\$0	\$0	\$0	\$0	\$0
Annual Routine Vision Exam	\$15	\$0	\$15	\$25 PCP/\$40 specialist	\$15
Annual Routine Hearing Exam	<i>Optional benefit*</i>	\$0	Not available	\$25 PCP/\$40 specialist	\$40
Dental Services					
· Diagnostic and preventive	\$0	\$0	\$0	\$0	\$0
Expanded Dental	<i>Optional Benefit*:</i>	<i>Optional Benefit*:</i>	<i>Optional Benefit*:</i>	<i>Included with Medical:</i>	<i>Included with Medical:</i>
· Maximum benefit – per member	\$2,000	\$2,000	\$2,000	\$1,000	\$2,000
· Deductible	\$50/\$100/\$150	\$50/\$100/\$150	\$50/\$100/\$150	\$25 per person/\$75 family	\$50/\$150
· Primary (basic) care	20% after deductible	20% after deductible	20% after deductible	20% after deductible	20% after deductible
· Complex restorative (inlays, onlays, crowns, dentures, bridgework)	50% after deductible	50% after deductible	50% after deductible	50% after deductible	50% after deductible
· Orthodontic - Lifetime maximum benefit	50% no deductible \$2,000	50% no deductible \$2,000	50% no deductible \$2,000	50% up to \$1,000 (age 19 and under)	50% no deductible \$2,000
Routine Vision - Basic Plan	<i>Included with Medical:</i>	<i>Included with Medical:</i>	<i>Included with Medical:</i>	<i>Included with Medical:</i>	<i>Included with Medical:</i>
· Annual Routine Vision Exam	\$15	\$0	\$15	\$25 PCP/\$40 specialist	\$15
· Eyeglass frames	80% of the retail price, OR 65% of the retail price when purchased as a complete pair of eyeglasses	65% of the retail price	80% of the retail price, OR 65% of the retail price when purchased as a complete pair of eyeglasses	Balance after plan pays \$75 (age 19+) <19 \$0 (1 pair/plan year)	80% after plan pays \$100
· Eyeglass lenses - standard plastic - Single - Bifocal - Trifocal	\$50 \$70 \$105	\$40 \$60 \$80	\$50 \$70 \$105	Balance after plan pays \$75 (age 19+) <19 \$0 (1 pair/plan year)	\$20
· Contact lenses** - Conventional** - Disposable** - Non-elective**	Conventional contact lenses: 85% of the retail price (discount applies to materials only)	Conventional contact lenses: 85% of the retail price	Conventional contact lenses: 85% of the retail price (discount applies to materials only)	Balance after plan pays \$25 discount if purchased at KP Optical	85% after plan pays \$100 Balance after plan pays \$100 \$0
Expanded Routine Vision	<i>Optional Benefit*:</i>	<i>Optional Benefit*:</i>			
· Eyeglass frames	80% after plan pays \$100	80% after plan pays \$100	Not available	Not available	Not available
· Lenses - Eyeglass lenses (standard plastic, single, bifocal or trifocal) or	\$20	\$20	Not available	Not available	Not available
· Contact lenses** - Conventional** - Disposable** - Non-elective**	85% of balance after plan pays \$100 Balance after plan pays \$100 Balance after plan pays \$250	85% of the retail price Balance after plan pays \$100 Balance after plan pays \$250	Not available	Not available	Not available
Routine Hearing	<i>Optional Benefit*:</i>	<i>Included in Basic Plan:</i>		<i>Included in Basic Plan:</i>	<i>Included in Basic Plan:</i>
· Routine hearing exam (once every plan year)	\$40	\$0	Not available	\$25 PCP / \$40 Specialist	\$40
· Hearing aids and other hearing-aid related services	Balance after plan pays \$1,200 (once every 48 months)	Not available	Not available	Not available	Balance after plan pays \$1,200 (once every 48 months)
· Benefit maximum	\$1,200	Not available	Not available	Not available	\$1,200
Out-of-Network	<i>Optional Benefit*:</i>	<i>Included in Basic Plan:</i>			
	Plan payment reduced by 25%. Balance billing may apply.	Additional deductible and out- of-pocket limits apply. 40% coinsurance after deductible of \$3,000/\$6,000. Balance billing may apply.	Not available	Not available	Not available. Out-of-area Dependent Children Program available.

The program also offers the TRICARE voluntary supplement, which coordinates with federal TRICARE benefits.

*Optional benefits are offered for an additional premium, and may be purchased in combinations as shown in your Open Enrollment booklet (see premium summary).

**Elective contact lenses are in lieu of eyeglass lenses. Non-elective lenses are covered when eyeglasses are not an option for vision correction.

WHO TO CONTACT

Plan or Benefit	Contact Information
COVA Care and COVA HDHP	<p>Medical, Vision & Hearing - Anthem: 800-552-2682 or www.anthem.com/cova</p> <hr/> <p>Prescription Drug - Anthem Pharmacy (CarelRx): 833-267-3108 or www.anthem.com</p> <hr/> <p>Behavioral Health & Employee Assistance Program (EAP) - Anthem: 855-223-9277 or www.AnthemEAP.com (Company Code: Commonwealth of Virginia)</p> <hr/> <p>Dental - Delta Dental of Virginia: 888-335-8296 or www.deltadentalva.com</p> <hr/> <p>Virtual Care Options Including LiveHealth Online: Sydney Health app or anthem.com/cova</p> <hr/> <p>Health Assessment - Login at www.anthem.com (or the Sydney mobile app) > My Health Dashboard > Programs Contact Anthem at 800-552-2682 to complete a telephonic health assessment.</p> <hr/> <p>Health and Wellness Programs - www.anthem.com > My Health Dashboard > Programs Condition Care (formerly Disease Management) and Well-being Coach: 844-507-8472 Future Moms: 800-828-5891</p>
COVA HealthAware	<p>Medical, Vision, Hearing & Behavioral Health - Aetna: 855-414-1901 or www.covahealthaware.com Behavioral Health: 866-885-5596</p> <hr/> <p>Prescription Drug - Anthem Pharmacy (CarelRx): 833-267-3108 or www.anthem.com</p> <hr/> <p>Employee Assistance Program (EAP) - Aetna: 888-238-6232 or www.mylifevalues.com (Username & Password: COVA)</p> <hr/> <p>Dental - Delta Dental of Virginia: 888-335-8296 or www.deltadentalva.com</p> <hr/> <p>Teladoc: www.teladoc.com/aetna or 855-835-2362</p> <hr/> <p>Health Assessment - Log in at www.aetna.com (or the Aetna mobile app) > Member Resources > Well-being Resources</p> <hr/> <p>Health and Wellness Programs - 855-414-1901 or log in at www.aetna.com > Member Resources > Well-being Resources</p>
Kaiser Permanente HMO (Primarily Northern Virginia - see website for specific zip codes)	<p>Medical, Prescription Drug and Vision - Kaiser Permanente: 800-777-7902, 301-468-6000 in Washington, D.C. or www.myhealth.kp.org/commonwealthofvirginia</p> <hr/> <p>Online doctor visit: www.kp.org or 800-777-7904</p> <hr/> <p>Dental - Dominion National: 855-733-7524 or http://www.DominionNational.com/kaiser</p> <hr/> <p>Behavioral Health - Kaiser: 866-530-8778</p> <hr/> <p>Employee Assistance Program (EAP) - Carel Behavioral Health: 866-517-7042 or www.achievesolutions.net/kaiser</p>
Optima Health Vantage HMO (Primarily Hampton Roads - see website for specific zip codes)	<p>Medical, Prescription Drug, Dental, Vision and Behavioral Health - Optima Health: 866-846-2682, www.optimahealth.com/cova, or members@optimahealth.com</p> <hr/> <p>Online doctor visit: MDLIVE or 866-648-3638</p> <hr/> <p>Employee Assistance Program (EAP): www.optimaeap.com (User name: COVA) or 800-899-8174</p>