



Commonwealth of Virginia COVA HealthAware Materials Order Form

Email completed form to: cheungj1@aetna.com

Allow 14 days for delivery of materials.

Date: _____

Name	Telephone
Email Address	Agency Name
Shipping Address*	

*Orders cannot be delivered to P.O. Box addresses

Plan Information/Brochures

Form#	Item	Quantity	Also available online at:
3118760-01-01 (2/24)	COVA HealthAware Brochure		www.covahealthaware.com/#resources
74.03.963.1- ARFL F (6/21)	Employee Assistance Program Flyer		www.covahealthaware.com/#resources
	COVA HealthAware Member Handbook	PDF only	https://www.dhrm.virginia.gov/employeebenefits/health-benefits/active-employees