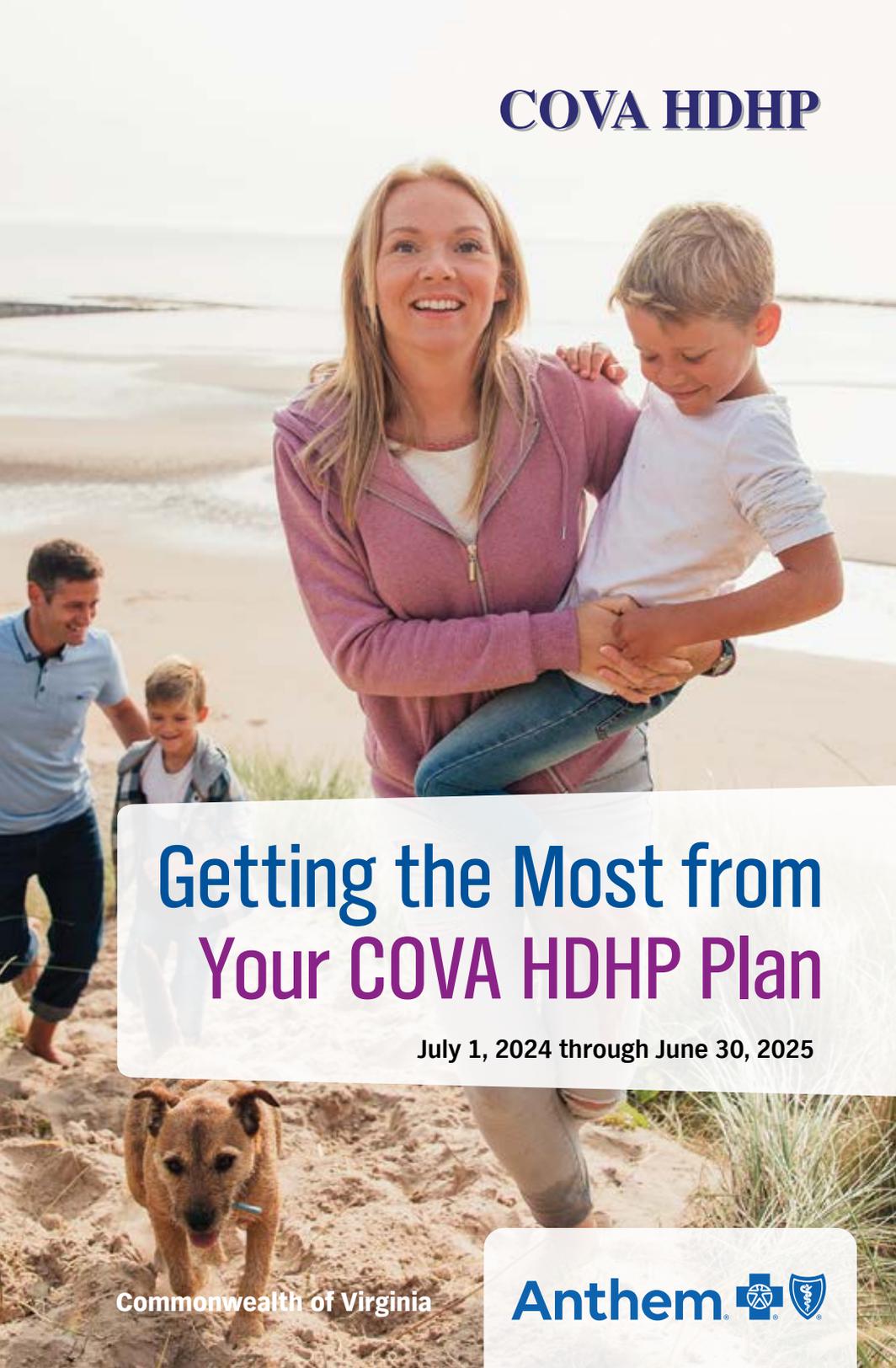


COVA HDHP



**Getting the Most from
Your COVA HDHP Plan**

July 1, 2024 through June 30, 2025

Commonwealth of Virginia

Anthem  

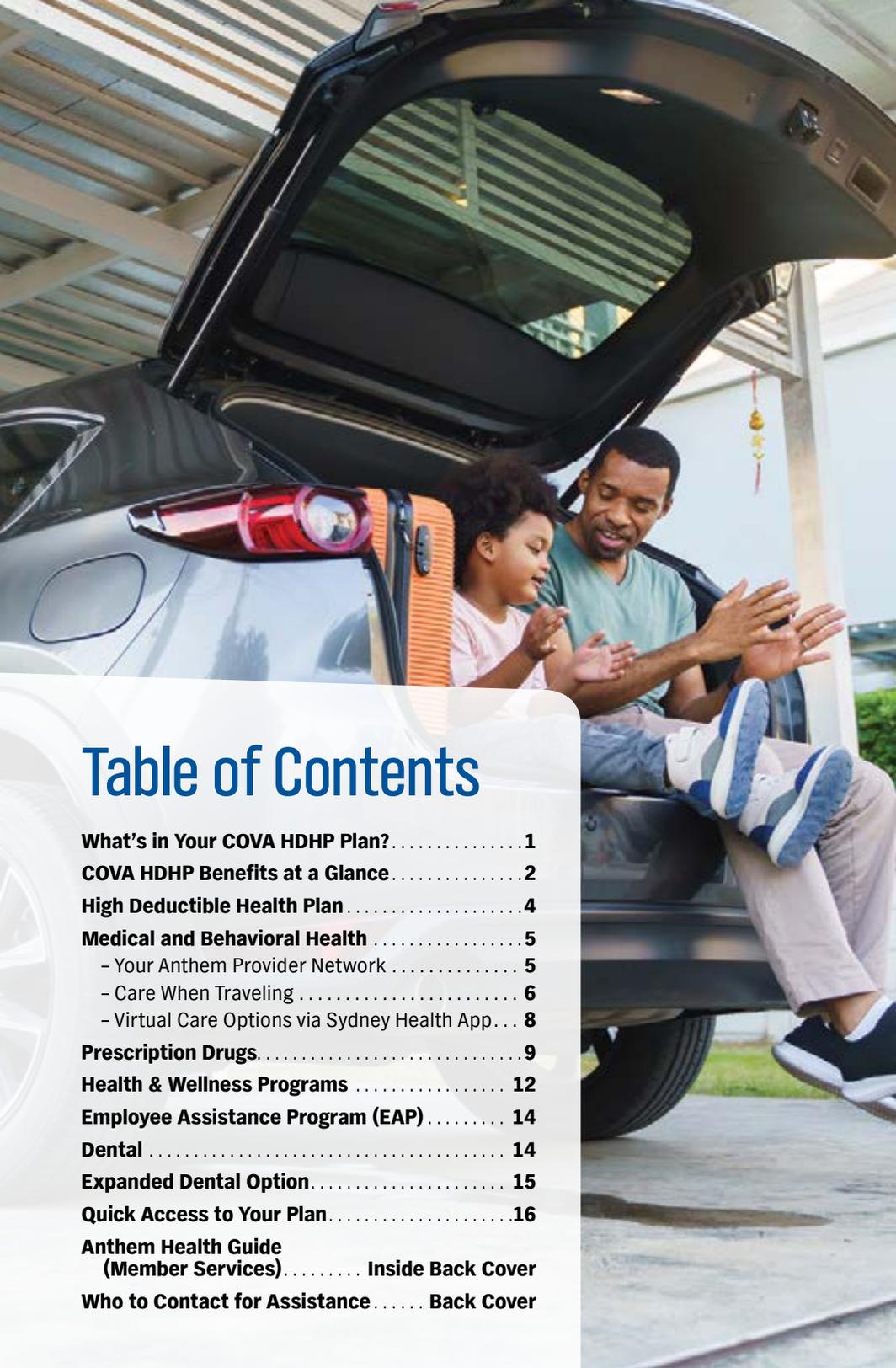


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What's in Your COVA HDHP Plan?

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
- 100% coverage for in-network preventive care, no deductible
- Specialist visits with no referrals
- Routine eye exam once per plan year
- In-network coverage through the Anthem HealthKeepers HMO network in Virginia, and the BlueCard® PPO and Blue Cross Blue Shield Global Core Programs for care outside Virginia
- Optional Expanded Dental Benefit (available for an additional premium)

Your Out-of-Pocket Expense Limit

\$5,000 for one person, **\$10,000** for two or more persons, each plan year

Your **medical, behavioral health and prescription drug deductible and coinsurance** 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
- Coinsurance and deductible for dental services



COVA HDHP Benefits At-A-Glance

Covered Services	You Pay
Deductible – per plan year	
○ One person	\$1,750
○ Two or more persons	\$3,500
Out-of-pocket expense limit – per plan year	
○ One person	\$5,000
○ Two or more persons	\$10,000
Ambulance travel	20% after deductible
Autism Spectrum Disorder treatment and related services	20% after deductible
Behavioral Health	
○ Inpatient	20% after deductible
○ Residential Treatment	20% after deductible
○ Partial Hospitalization (Day) Program	20% after deductible
○ Intensive Outpatient Treatment Program (IOP)	20% after deductible
○ Outpatient Treatment Program	
– Facility services (per episode of care)	20% after deductible
– Medical and non-medical professional	20% after deductible
Chiropractic, manual medical interventions (30-visit plan year limit)	20% after deductible
Dental Services (routine)	
○ Diagnostic and preventive (routine oral exams and cleanings twice per plan year, x-rays, sealants and fluoride for children)	\$0
○ See page 15 for Expanded Dental option	
Diagnostic tests, x-rays, labs and injections (outpatient)	20% after deductible
Dialysis treatments	20% after deductible
Doctor's visits	20% after deductible
Emergency room visits	20% after deductible
Employee Assistance Program (EAP)	
○ Up to 4 visits per issue, per plan year	\$0
Hearing Aid (18 and younger)	
○ Dependents 18 years old and younger, one hearing aid per ear, up to a cost of \$1,500, every 24 months. Hearing aid cost is subject to the deductible first, then \$0 coinsurance.	\$0 after deductible
Home health services (90-visit plan year limit)	20% after deductible
Home private duty nurse's services	20% after deductible

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 HDHP member handbook, available at anthem.com/cova.

Covered Services	You Pay
Hospice care	20% after deductible
Hospital services	
<ul style="list-style-type: none"> ○ Inpatient 	20% after deductible
<ul style="list-style-type: none"> ○ Outpatient 	20% after deductible
Infusion therapy (includes IV and injected chemotherapy)	20% after deductible
Maternity	
<ul style="list-style-type: none"> ○ Professional provider services (prenatal & postnatal care) 	20% after deductible
<ul style="list-style-type: none"> ○ Hospital services for delivery (delivery room, anesthesia, routine nursing care for newborn) 	20% after deductible
<ul style="list-style-type: none"> ○ Outpatient diagnostic tests 	20% after deductible
Medical equipment, appliances, and supplies	20% after deductible
Prescription drugs – mandatory generic	
<ul style="list-style-type: none"> ○ Retail Pharmacy 	20% after deductible
<ul style="list-style-type: none"> ○ Home Delivery Pharmacy (Mail Service) 	20% after deductible
<ul style="list-style-type: none"> ○ Diabetic supplies 	20% after deductible
<ul style="list-style-type: none"> ○ Prescription Insulin Drugs to Treat Diabetes 	34-day supply not to exceed \$50, no deductible 90-day supply not to exceed \$150, no deductible
Skilled nursing facility (180-day limit per stay)	20% after deductible
Therapy services	
<ul style="list-style-type: none"> ○ Occupational, Physical, and Speech therapy, Cardiac Rehabilitation, Chemotherapy, Infusion, Radiation, and Respiratory therapy 	20% after deductible
Virtual Care through Sydney Health app	
<ul style="list-style-type: none"> ○ LiveHealth Online 	20% after deductible
<ul style="list-style-type: none"> ○ Symptom Checker 	\$0
<ul style="list-style-type: none"> ○ Text Chat or Video Visit with Medical Provider 	20% after deductible
<ul style="list-style-type: none"> ○ Virtual Wellness/Preventive Visit 	\$0
Vision (routine eye exam once per plan year)	\$15 copayment
Wellness & Preventive Services	
<ul style="list-style-type: none"> ○ Office visits at specified intervals, immunizations, lab and x-rays 	\$0
<ul style="list-style-type: none"> ○ Annual check-up visit (primary care or specialist), immunizations, lab and x-rays 	\$0
<ul style="list-style-type: none"> ○ Routine gynecological exam, Pap test, mammography screening, prostate exam (digital rectal exam), prostate specific antigen (PSA) test, and colorectal cancer screening 	\$0
Out of Network	Additional deductible and out-of-pocket limits apply. 30% coinsurance after deductible of \$1,750/\$3,500. Balance billing may apply.

Your High Deductible Health Plan is HSA Compatible

Enrollment in a HDHP allows you to set up a personal Health Savings Account (HSA) through a bank or other financial institution to help you manage health care expenses or save for retirement. HSAs were created as part of Medicare reform legislation in 2003. An HSA is a tax-favored account that allows those covered by a HDHP to pay for certain qualified medical expenses. It can help you save on the cost of your health insurance and health care expenses, and also help pay for covered services before you satisfy the health plan deductible. If you decide to set up an HSA to work with your HDHP, confer with your tax advisor, bank or other financial institution.

The following Web sites are a good place to start learning more about HSAs.

- www.treasury.gov – Provides an overview of HSAs, answers to frequently asked questions and important IRS forms and applications. Search using keyword HSA.
- www.irs.gov – Provides information about how HSAs impact your Federal taxes and qualified medical expenses (Publications 969 and 502). Search using keyword HSA.
- www.hhs.gov – Provides general information about HSAs and other tax-favored health plans. Search using keyword HSA.

Note: If you have an HSA, you cannot also have a Flexible Spending Account unless it is limited in scope. More information is available from tax consultants or financial institutions.





Medical and Behavioral Health

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 HDHP (HMO)*.

Annual Deductible

\$1,750 for one person, **\$3,500** for two or more persons, each plan year.

Coinsurance

- 20% coinsurance after deductible
- Zero coinsurance and no deductible for Routine Wellness and Preventive services

Your Anthem Provider Network

Anthem HealthKeepers HMO Network

The HealthKeepers HMO network includes most providers and all hospitals in the state of Virginia*. Members do not need a referral for services but should check the provider finder on the Sydney Health app or Anthem.com to ensure providers are in the HealthKeepers HMO network before receiving services. When seeing providers outside of Virginia, HDHP members will use Anthem's Blue Card national PPO network. Members will have out-of-network benefits. There will be a separate deductible and out-of-pocket limit for in-network and out-of-network services. The in-network and out-of-network deductibles and out-of-pocket limits will not accumulate toward each other. To search in-network providers in-state or out-of-state, go to [anthem.com/cova/find-care](https://www.anthem.com/cova/find-care) and select *Find Care for COVA HDHP (HMO)*. Please note that **LabCorp is the exclusive laboratory for HealthKeepers**. Members should use LapCorp for any labs to be considered in-network.

*subject to change based on contract negotiations

Finding an in-network provider is easy.

1. Go to [anthem.com/cova/find-care](https://www.anthem.com/cova/find-care) and select *Care for COVA HDHP (HMO)*.
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.**

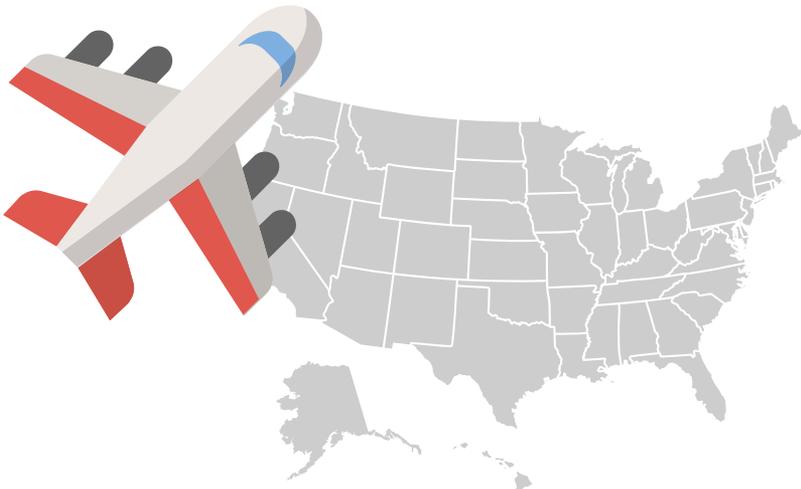
What happens if you're traveling or living outside Virginia and you need care? You have access to care across the country through the **BlueCard® PPO Program**. This includes a large number of providers and hospitals nationwide. When you see a BlueCard program doctor or hospital you pay only your usual plan deductible, 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](https://www.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.



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 hcbsglobalcore.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 hcbsglobalcore.com and enter the three-digit alpha prefix found on your ID card. Or call Anthem Member Services to request the form.



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.



Virtual Care Options through Sydney Health App

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. Whether you

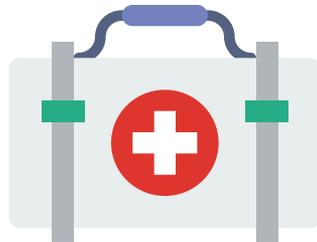


prefer to use medical text chat or have a video visit, Sydney Health is the gateway that connects you to the virtual care options included in your benefits. Use your smartphone to access virtual care solutions for all your physical and behavioral health needs.

Services include:

- Comprehensive primary care, coordinated by a care team
- Wellness visits
- Preventive care and lab screenings
- 24/7 Urgent or sick care for common medical conditions like the flu, colds, allergies, pink eye, sinus infections, and more
- New prescriptions and refills
- Mental Health providers including therapists, psychologists, and psychiatrists
- Care for on-going conditions like diabetes, hypertension, and asthma
- Access to specialty care such as lactation consultants, physical therapists, dermatologists, sleep specialists, and allergists

Log in to the Sydney Health app, and access the Care Center to view all the options available to you. **Note:** Some options require a secondary app. You will be prompted to download the app during the account setup process.





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 coinsurance plus the difference between the allowable charge for the generic and the brand name drug after the deductible.

No-cost Condition-related Medications

We're making it easier for you to get certain condition-related, maintenance medications at no-cost. Starting in July, all members who take certain medications to manage specific conditions will have a \$0 coinsurance 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 in the program.

Retail Pharmacy

Get up to a 34-day supply of covered drugs at a network retail pharmacy. Once your deductible has been met, pay the coinsurance 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 coinsurance after deductible.

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

Switching to home delivery is simple. You can place your first order by phone or online at [anthem.com](https://www.anthem.com). You pay **the appropriate coinsurance for a three month supply** of drugs when you use the Home Delivery service, and the medication is delivered right to your home.

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 Benefits 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 a 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 by paying the appropriate coinsurance.



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.

If Prior Authorization is needed, your doctor must submit the request. Typically, a decision whether the drug will be covered is 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*.
- Click the icon on the left side of each Rx claim to view 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.**





Anthem Health & Wellness Programs

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

- **ConditionCare:** Get support to manage these conditions:
 - Asthma
 - Chronic obstructive pulmonary disease (COPD)
 - Heart failure
 - Coronary artery disease (CAD)
 - Diabetes
 - Hypertension

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.

- **Future Moms is now Building Healthy Families**
Building Healthy Families provides personalized, on-demand health support for members who are pregnant, postpartum, or raising young children. Log on 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 833-414-4200 to enroll.



- **MyHealth Advantage:** Receive personalized health related suggestions, tips, and reminders via mail, email, or the Sydney Health mobile app to alert you of potential health risks, care gaps or cost-saving opportunities.
- **Anthem's 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 the program which has shown to lower a person's risk for type 2 diabetes by 60%. Find out more and see if you are eligible by logging into the Sydney Health app.

- **Virtual Physical Therapy**

LiveHealth Online and SWORD Health offer LiveHealth Online Healthy Back and Joints for in-home, virtual physical therapy. This effective and convenient program addresses a broad range of musculoskeletal conditions and works at any point in the care journey including prevention, new conditions, chronic pain, and mobility management. The program leverages smart digital sensors and a wireless tablet that are shipped to the member, and dedicated licensed physical therapists who provide custom exercise plans and education, continuous engagement, and behavioral health resources to decrease pain and increase mobility.

- **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.

- **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 cova.smartshopper.com or call the Care Concierge Team at 1-844-277-8991.



Get more information on your Anthem Health & Wellness programs at anthem.com > [Login](#) > [My Health Dashboard](#) > [Programs](#).



Employee Assistance Program (EAP)

Your EAP gives you, your covered dependents and members of your household **up to four free confidential counseling sessions per issue** each plan year. Connect with providers virtually or via mobile messaging through LiveHealth Online and Talkspace. Turn to your EAP for information and resources about:

- Emotional well-being
- Addiction and recovery
- Work and career
- Childcare and parenting
- Helping aging parents
- Financial issues (including free credit monitoring and identity theft recovery)
- Legal concerns



Learn all about your EAP services and resources.
Call 1-855-223-9277 or visit online at [anthemEAP.com](https://www.anthemEAP.com).

Enter **Commonwealth of Virginia** as company code



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

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

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



Expanded Dental Option

(offered for an additional premium)

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

Administered by Delta Dental

Plan Year Maximum Benefit - per member <i>(except Orthodontic)</i>	\$2,000
Plan Year Deductible	\$50 One person \$100 Two people \$150 Family <i>(three or more people)</i>
	In-Network You Pay
Primary <ul style="list-style-type: none"> ○ 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 <ul style="list-style-type: none"> ○ Crowns <i>(single crowns, inlays and onlays)</i> ○ Prosthodontics <i>(partials or complete dentures and fixed bridges)</i> ○ Dental implants 	50% after deductible
Orthodontic <i>(\$2,000 lifetime maximum benefit per member)</i> <ul style="list-style-type: none"> ○ Removable and fixed appliance therapy and comprehensive therapy for adults and children 	50%, no deductible

Out-of-network benefits are included.

Quick Access to Your Plan

[Anthem.com/cova](https://www.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)

[Anthem.com](https://www.anthem.com)

Log in to your confidential and secure account

- View your claims
- Download your ID card
- Find care
- Refill prescriptions online
- Compare costs for hundreds of medical procedures

Sydney Health mobile app

The *Sydney Health* mobile app acts like a personal health assistant, answering your questions and connecting you to the right resources at the right time. Plus, use the “chatbot” feature to get answers quickly.



Log in using your [anthem.com](https://www.anthem.com) username and password to:



See your medical and pharmacy benefits in one place, and check costs



Find high-quality doctors or specialists in your plan and near you



Connect easily to virtual care



View and use your digital ID card



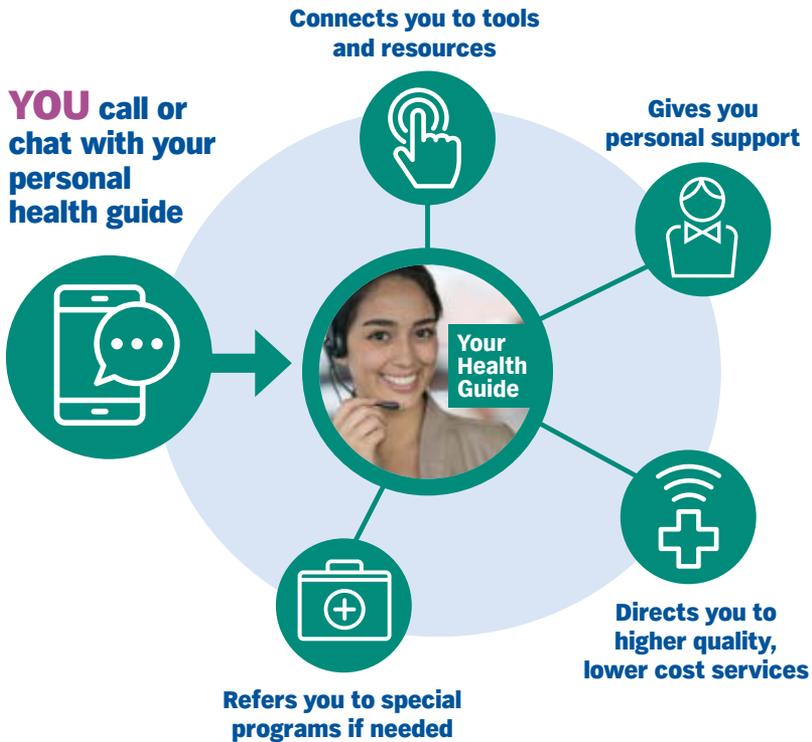
Access your online Health Assessment



...and so much more. Download the app and get started!

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.



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

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 <i>(Company Code: Commonwealth of Virginia)</i>
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 <i>(coverage outside Virginia)</i>	1-800-810-2583 bcbs.com
Blue Cross Blue Shield Global Core <i>(coverage outside of the U.S.)</i>	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
ALEX Benefits Counselor	myalex.com/cova/2024

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

COVA HDHP

Commonwealth of Virginia



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) - 귀하에게 무료로 이 정보를 얻고 귀하의 언어로 도움을 받을 권리가 있습니다. 도움을 얻으려면 귀하의 ID 카드에 있는 회원 서비스 번호로 전화하십시오.

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

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