

Choosing and using your plan

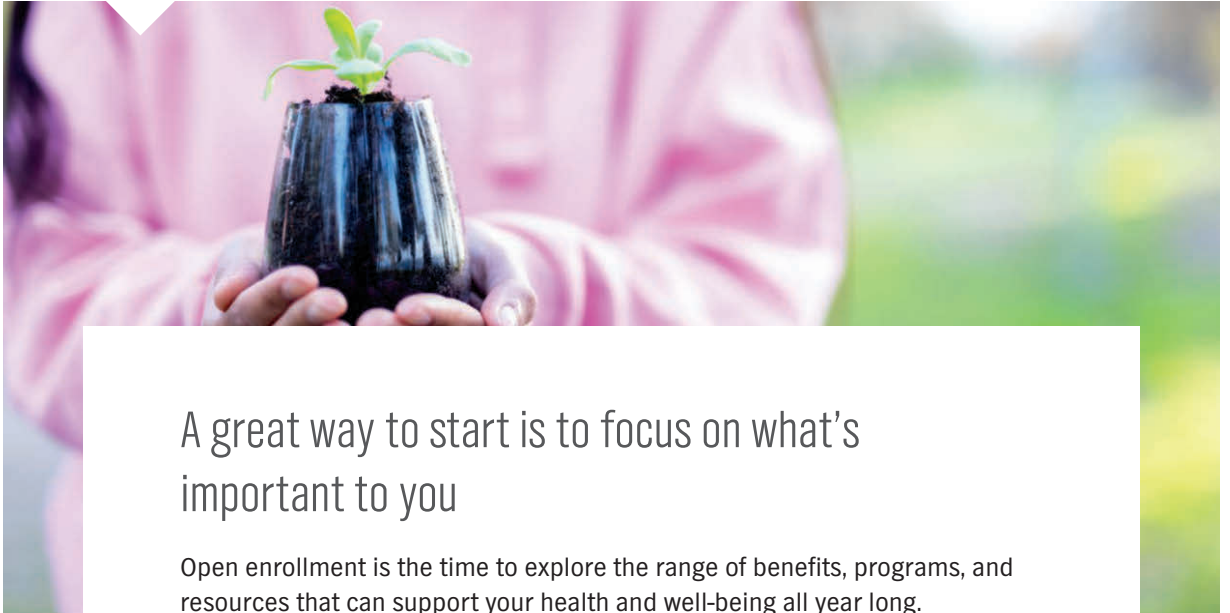
Your guide to open enrollment and
making the most of your benefits



Milford



It's time to choose your plan



A great way to start is to focus on what's important to you

Open enrollment is the time to explore the range of benefits, programs, and resources that can support your health and well-being all year long.

This guide was created to help you understand our plans. It also has tips, tools, and resources that can help you reach your health and wellness goals when you become a member. Save it to help you make the most of your benefits throughout the year.

Save this guide

You will find tips on how to make the most of your benefits and save on healthcare costs throughout the year.





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The basics of your health plan



Understanding healthcare terms

Deductible:

A set amount you pay each year for covered services before your plan starts to pay for covered healthcare costs.

Copay:

A flat fee you pay for covered services, such as doctor visits.

Coinsurance:

Once you've met your deductible, you and your health plan share the cost of covered healthcare services. The coinsurance is your share of the costs, usually a percent of the cost of care. Your plan details show what portion of the cost you will pay.

Out-of-pocket limit:

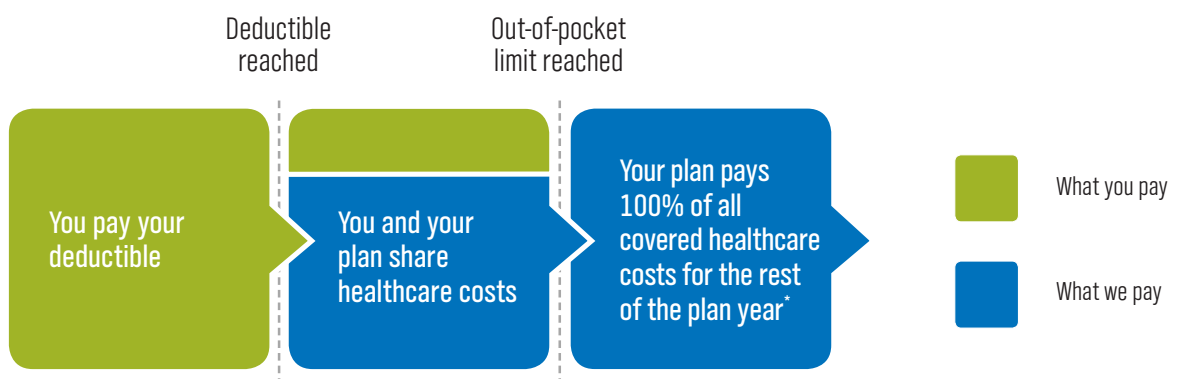
This is the maximum amount you could pay before your plan starts to pay 100% of all covered healthcare costs.* It's the sum of the deductible and coinsurance amounts.

Premium:

The premium, also called a monthly payment, is what you pay for the plan. It's the money that comes out of your paycheck.



What you pay and what your plan pays

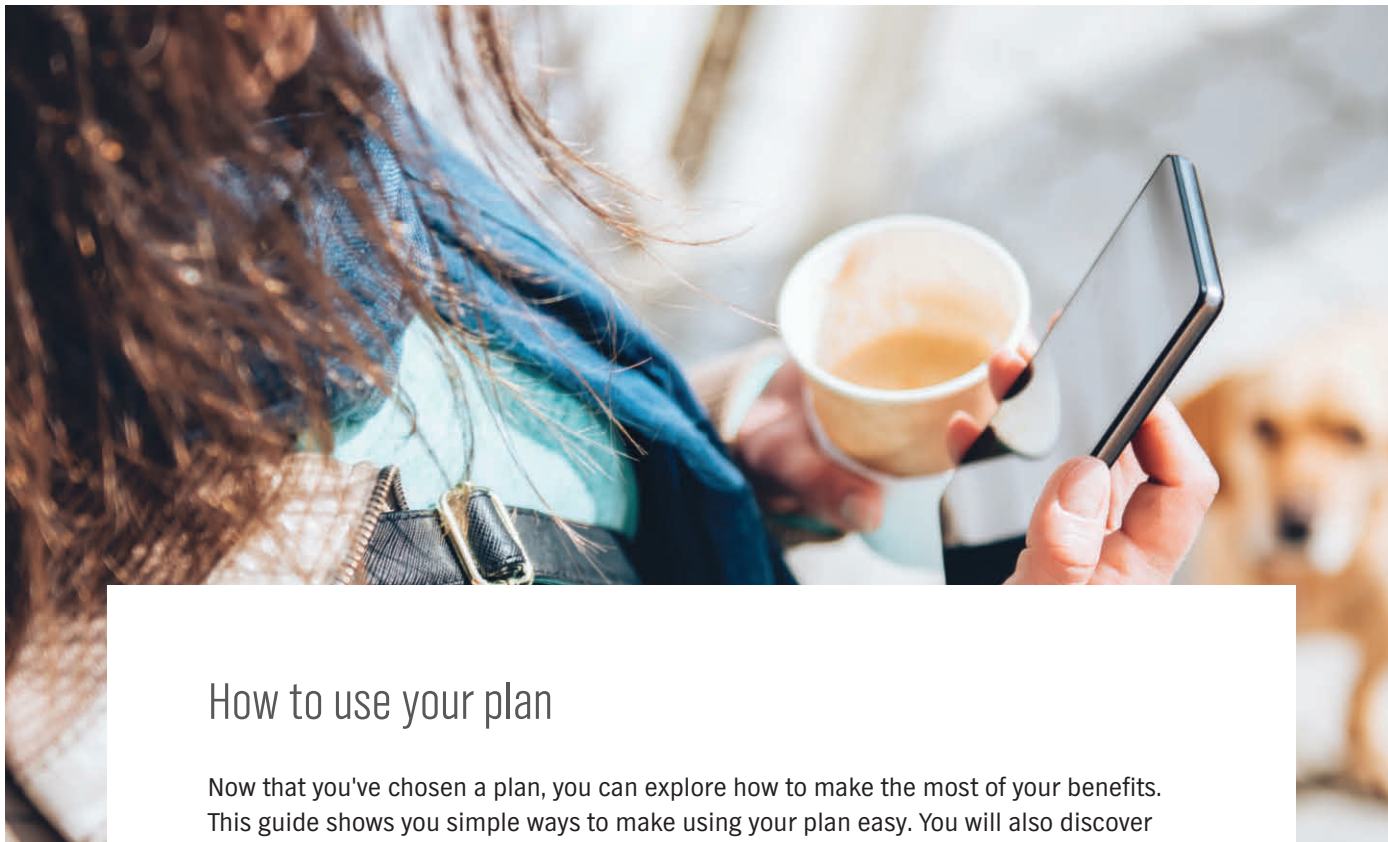


This chart is only an example. Your actual cost share will depend on your plan, the service you receive, and the doctor you choose. Refer to your plan details to see your actual share of the cost.

* There are plans that require you to pay a copay at the time of service.



Using your plan



How to use your plan

Now that you've chosen a plan, you can explore how to make the most of your benefits. This guide shows you simple ways to make using your plan easy. You will also discover tools and resources that can help you reach your health and wellness goals.



How to use your plan

Use your ID card from your phone

Quickly access your ID card on your phone by using the **Sydney Health** mobile app or logging in at **anthem.com**. Your digital ID card works the same as a paper one. You can share it with your doctor or pharmacy by printing a copy anytime you need one, or emailing or faxing it from your computer or mobile device. You also can download your ID card for quicker access.

Register for online tools and resources

Accessing your health plan on your mobile phone or computer makes it more convenient to manage your plan. Register on the **Sydney Health** mobile app and **anthem.com** to receive personalized information about your health plan. You can also:

- Quickly access your digital ID card.
- Assess your symptoms at no cost, and get personalized information about a diagnosis, including over-the-counter medicine to take, and recovery time.
- Text with a board-certified doctor at no extra cost,¹ discuss treatment options, and order prescriptions.
- Find a doctor and estimate your costs before you receive care.
- View your claims, see what's covered, and what you may owe for care.
- Find support managing your health conditions and tracking your goals.
- Update your email and communication preferences.

¹ Pricing based on \$0 copay benefit eligibility offered through your plan.



How to use your plan

Find a doctor in your plan

The right doctor can make all the difference. Choosing a doctor who is in your plan's network can save you money. Your plan includes a broad selection of high-quality doctors. If you decide to receive care from doctors outside the plan's network, it will cost you more and your care might not be covered.

To find a doctor in your plan's network, use the **Find Care** tool on the **Sydney Health** mobile app or at **anthem.com**. You can search for doctors, hospitals, and other healthcare professionals. You can also use the tool to search for high-quality, low-cost labs in your plan's network.

Schedule a checkup

Preventive care, such as regular checkups and screenings, can help you avoid health issues in the future. Your plan covers these services at little or no extra cost when you see a doctor in your plan's network:

- Yearly physical
- Well-child visits
- Flu shot
- Routine shots
- Screenings and tests

Check your plan details on the **Sydney Health** mobile app or **anthem.com/find-care** to confirm what preventive care is covered.



How to use your plan

Access care from home in a way that works for you

- Assess your symptoms online at no cost. Answer questions through the **Sydney Health** intuitive Symptom Checker. It uses the information you provide to narrow down millions of medical data points and assess your specific symptoms before you visit a doctor.
- Text with a board-certified doctor at no extra cost.¹ **Sydney Health** can link you directly to doctors for virtual text visits. During your appointment, the doctor can evaluate your symptoms, discuss your treatment options, and order prescriptions, if you need them.
- Have a video chat with a doctor. You can also use **Sydney Health** to connect with a board-certified doctor through video visits.
- See a doctor from home. Go to **livehealthonline.com** or download the **LiveHealth Online** mobile app to begin.

Where to go for care when you need it now

When it is an emergency, call 911 or go to the nearest emergency room.

If you need nonemergency care right away:

- Check to see if your primary care doctor can see you.
- Search for nearby urgent care to avoid costly emergency room visits and long wait times.
- See a doctor anytime using LiveHealth Online from your mobile device or computer.
- Call 24/7 NurseLine and receive helpful advice from a registered nurse.



¹ Pricing based on \$0 copay benefit eligibility offered through your plan. LiveHealth Online is the trade name of Health Management Corporation.



Plan extras that support your health

For details, register on the **Sydney Health** mobile app or at **anthem.com**.

Your plan comes with great tools and programs to help you reach your health goals and save money on health products and services that may come at no extra cost. For detailed information, register on the Sydney Health mobile app or at **anthem.com**.

Apps

Discover a powerful and more personalized health app. Access your benefits and wellness tools to improve your overall health with the **Sydney Health** app. The mobile app works with you by guiding you to better overall health — and works for you by bringing your benefits and health information together in one convenient place. **Sydney Health** has everything you need to know about your benefits to make the most of them while taking care of your health.

Working with you:

- Reminding you about important preventive care needs.
- Planning and tracking your health goals, fitness, and rewards.
- Guiding you with insights based on your history and changing health needs.
- Empowering you with personalized tools to find and compare healthcare providers and check costs.

Working for you:

- **Symptom Checker** — Answer questions through the **Sydney Health** intuitive Symptom Checker. It uses the information you provide to narrow down millions of medical data points and assess your specific symptoms before you visit a doctor.
- **Virtual text visits** — **Sydney Health** can link you directly to board-certified doctors for virtual text visits at no extra cost.* During your appointment, the doctor can evaluate your symptoms, discuss your treatment options, and order prescriptions, if you need them.
- **Virtual video visits** — You can also use **Sydney Health** to connect with a board-certified doctor through video visits.

Are you looking for healthy advice?

Follow our **Better Care Blog** (anthem.com/blog/) for helpful information about health benefits, living healthy, and the latest member news.



* Pricing based on \$0 copay benefit eligibility offered through your plan.



Plan extras that support your health

For details, register on the **Sydney Health** mobile app or at **[anthem.com](https://www.anthem.com)**.

Anthem Skill — Our Anthem Skill for Alexa is a voice-activated assistant for your health plan. Receive answers to your healthcare questions — hands-free by enabling the Anthem Skill. It works through any Alexa-enabled device, such as an Amazon Echo, or on your mobile device using the Amazon Alexa app.

- Ask for your digital member ID card.
- Check your progress toward meeting your medical plan's deductible and out-of-pocket maximum.

If you do not have the Amazon Alexa app, download it from Google Play™ or the App Store®.

Choose an easier way to better health

Health and wellness programs designed for your unique needs

Whether you're suffering from asthma, expecting a baby or just fighting a cold, our health and wellness programs can help.



ConditionCare

If you have asthma, diabetes, chronic obstructive pulmonary disease (COPD), heart disease or heart failure, ConditionCare can give you the tools and resources you need to take charge of your health. You'll get:

- 24/7, toll-free phone access to nurses who can answer health questions.
- Support from nurse care managers, dietitians and other health care professionals to help you reach your health goals.
- Educational guides, electronic newsletters and tools to help you learn more about your condition(s).



Future Moms

Having a baby is an exciting time! Future Moms can help you have a healthy pregnancy and a healthy baby. Sign up as soon as you know you're pregnant. You'll get:

- A nurse specializing in obstetrics who can answer your questions, 24/7, and will call to check on your progress.
- The *Mayo Clinic Guide to a Healthy Pregnancy*, which explains the changes your body and baby are going through.
- A screening to check your health risks.
- Resources to help you make healthier decisions during pregnancy.
- Free phone access to pharmacists, nutritionists and other specialists, if needed.
- Other helpful information on labor and delivery, including options and how to prepare.



24/7 NurseLine

Whether it's 3 a.m. or a lazy Sunday afternoon, you can talk to a registered nurse any time of the day or night.

These nurses can:

- Answer questions about health concerns.
- Help you decide where to go for care when your doctor, dentist, or eye doctor isn't available.
- Help you find providers and specialists in your area.
- Enroll you and your dependents in health management programs.
- Remind you about scheduling important screenings and exams, including dental and vision check ups.

Get the support you need

Call us to sign up and use these programs at no extra cost:

- ConditionCare: 866-962-0959
- Future Moms: 800-828-5891
- 24/7 NurseLine: 800-337-4770



Health Savings Account



Use this guide to understand the fees that may come with using your health savings account (HSA). If you are charged a fee, it will automatically be deducted from your HSA.

Member account holder fees:

| Description of fee | Charge (subject to change) | Notes |
|---|-------------------------------|---|
| Non Anthem account maintenance fee | \$3.95 | If you leave your company-sponsored plan but keep your current HSA, you are responsible for this monthly fee. |
| Monthly investment account fee | \$2.25 | A \$1,000 minimum balance is required. |
| Account closure fee | \$25 | This is a one-time fee charged when you close your account. |
| Cash advance fee | \$0 | Cash advances are not allowed. |
| Check reorder fee | \$0 | Only electronic bill payment options are allowed. |
| Check writing fee | \$0 | Only electronic bill payment options are allowed. |
| Debit card – ATM withdrawal | \$0 | ATM withdrawals are not allowed. |
| Debit card transactions | \$0 | This is included in the monthly fee. |
| Excess contribution refund | \$0 | |
| Overdraft fee | \$0 | |
| Payment directed to doctor or other healthcare professional | \$0 | |
| Quarterly paper statement fee | \$1.50 | We'll waive this fee if you choose paperless statements. |
| Reimbursement to member | \$0 | |
| Return item fee | \$15 | Applies when you don't have enough funds in your account to successfully process a transaction. |
| Stop payment fee | \$0 | |
| Teller withdrawal | \$0 | This service is not available. |

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Your health savings account

Frequently asked questions

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Health savings account (HSA)

Q. What is an HSA?

- A. An HSA is a tax-free savings account that's paired with a high-deductible health plan (HDHP). By law, to open or contribute to an HSA, your medical plan must be a qualified HDHP. The required deductible is set by the Internal Revenue Service (IRS) each year. The limit for 2021 is \$3,600 for an individual and \$7,200 for a family. You can use the money in your HSA to pay for qualified medical expenses (QME). For a full list of QMEs, visit [qme.anthem.com](https://www.qme.anthem.com). You can also save money in your HSA for future healthcare costs. The account grows with interest and you have investment options after your account reaches a minimum balance of \$1,000. The HSA belongs to you and the money in the account is yours to keep, even if you leave your employer.

Q. How is my HSA funded?

- A. Your HSA is funded by pretax contributions, up to a certain annual limit. If you choose to contribute money to your HSA after taxes are taken out, you can claim the contributions on your tax return. Others — including your employer — may contribute to your account as well. You can earn additional dollars for your HSA by taking certain steps to improve your health. The total of all contributions cannot be more than the maximums defined by the IRS. (See the question: [How much can I contribute to my HSA?](#) for details.)

The IRS has specific rules on who can open an HSA. See those rules in [IRS Publication 969](#).¹

Q: I'm a veteran with a service-connected disability. Can I contribute to an HSA?

- A: Yes. A 2016 amendment to the eligibility rules allows veterans with a high-deductible health plan, no disqualifying coverage, and who have a service-connected disability to make or receive HSA contributions, regardless of when they received benefits from the Department of Veterans Affairs (VA). This amendment also applies to contributions from the veteran's employer. Veterans with a service-connected disability are not blocked from HSA eligibility because they accessed VA benefits in the past three months.



If a veteran receives VA medical benefits for a non-service-connected disability during the prior three months, they are not eligible to make or receive HSA contributions.

Q. Can I have an HSA if my spouse is on Medicare?

- A. Yes, as long as you're not enrolled in Medicare and you meet the IRS eligibility requirements for an HSA. If you contribute to an HSA and cover your spouse on your plan, you can use your HSA funds to pay for qualified medical expenses for you and your spouse on Medicare.

Q. My spouse is enrolled in Medicare. Can they also be enrolled as a dependent on my HSA?

- A. Yes, but your spouse cannot open an HSA account in their name. You may use your HSA to pay for qualified medical expenses for you and your spouse on Medicare.

Q. Who can use the money in an HSA?

- A. The money can be used to pay for qualified medical expenses for you, your spouse, or any IRS-qualified dependent who you claimed on your income taxes, even if they're not covered on your health plan. Talk with a tax advisor to find out if these rules apply to your tax situation. You can also go to [irs.gov](https://www.irs.gov) to find out who qualifies as a dependent.

Q. I am enrolled in an HSA. Can I continue to contribute to my spouse's HSA and use their bank?

- A. You and your spouse can continue to make contributions to their HSA, but you can't contribute more than the IRS family contribution maximum between both accounts. For 2021, the family contribution maximum is \$7,200.

Q. My child is under 26, but I no longer claim them on my taxes. Can I still cover them using my HSA?

- A. The IRS has specific rules about covering children and children of divorced or separated parents. Please see [IRS Publication 969¹](#) and talk with a tax advisor. You can cover dependents under age 26 but you can't use your HSA for their expenses unless they meet the following requirements:
- You can claim the child on your tax return.
 - Your child is under age 19, or age 24 if a full-time student, or totally and permanently disabled.

Dependents who don't qualify to receive funds from your HSA may qualify to open their own HSA and could be permitted to contribute up to the family maximum (for 2021, this is \$7,200). They can contact a financial institution to discuss how to set up a separate HSA.

Q. What's the difference between an HSA and a healthcare flexible spending account (HCFSA)?

- A. Both HSAs and HCFsAs can be funded with pretax dollars and can be used to pay for qualified medical expenses. However, HSA balances roll over from year to year, while HCFSA money is generally forfeited if it's not spent during a 12-month period. Additionally, if you leave your employer, your HSA dollars are yours to keep but HCFSA dollars are forfeited.

Q. Can I have an HSA and an FSA?

- A. Yes, you can have both an HSA and a compatible FSA, as long as it's defined as a:
- **Limited-Purpose FSA**, which may be limited to dental or vision services.
 - **Post-Deductible FSA**, which also allows for dental or vision services, as well as paying for coinsurance under the traditional health component of your plan, after meeting the deductible.
 - **Dependent Care FSA**, you can use tax-exempt funds to pay for childcare expenses that you incur while at work. Employees can also use FSAs to cover adult daycare expenses for elderly family members who live in the home.
 - **Commuter Benefits**, to pay for work transportation and parking. You have until DATE to use the funds in this account or the funds will be forfeited.

Making contributions to your HSA

Q. How much can I contribute to my HSA?

- A. The annual contribution maximum in 2021 is \$3,550 (2020) \$3,600 (2021) for individual coverage and \$7,100 (2020) \$7,200 (2021) for family coverage. The maximums are set by the IRS and may increase every year due to inflation. Check [irs.gov](https://www.irs.gov) for the most current maximum amounts.

Q. Can I ever contribute more than the annual limit?

- A. Yes, people age 55 and older who are not enrolled in Medicare can contribute an extra \$1,000 above the regular limits. This is called a “catch-up contribution.” These individuals can make catch-up contributions each year until they enroll in Medicare.

Only the account holder can make catch-up contributions. The contribution amounts allowed are subject to proration if you are enrolled in the plan less than 12 months or under other circumstances. Catch-up contributions can be made in the same way your regular contributions are made.

Q. What if my spouse has an HSA, too?

- A. The chart below explains different situations:

| If your spouse: | And you have: | Then, the IRS: |
|---|--|--|
| Has PPO (preferred provider organization) self + children coverage. | HDHP (high-deductible health plan) self-only coverage. | Treats you as having single coverage and only you may set up an HSA. You may contribute up to \$3,550 (2020) \$3,600 (2021). |
| Has HDHP self-only coverage with a \$1,500 deductible. | HDHP self + child coverage with a \$3,000 deductible. | Treats you both as having family coverage, and combined you may contribute up to \$7,200 to your HSAs. |
| Has HDHP self + family coverage with a \$3,000 deductible. | HDHP self + spouse coverage with a \$3,000 deductible. | Treats you both as having family coverage, and combined you may contribute up to \$7,200 to your HSAs. |
| Is enrolled in Medicare. | HDHP self + family coverage only. | Will only allow you to set up an HSA. You may contribute up to \$7,200. |

Q. Does tax filing status (joint vs. separate with my spouse) affect my HSA contribution?

- A. Tax filing status does not affect your contribution. Contribution limits are based on whether you have single or family medical plan coverage, not your tax filing status.

Q. Can I use my HSA to pay for eligible expenses for my spouse even if we file our taxes separately?

- A. Yes, the IRS requirements simply refer to eligible expenses for the “spouse” – they do not include requirements for filing jointly or separately.

Q. Can I contribute to an HSA if my spouse has an HCFSAs?

- A. Usually, a healthcare FSA covers the expenses of the participant and their spouse and dependents. If your spouse has an HCFSAs, it most likely covers your healthcare costs. If so, then you won't be able to make contributions to your HSA.

There are exceptions to this rule. For example, if your spouse's HCFSAs is a limited-purpose HCFSAs that only covers dental and vision costs. See [IRS Publication 969](#).¹

Q. Can I use my HSA to pay for medical expenses I had before my account was set up?

- A. No, you cannot be reimbursed for qualified medical expenses from before the date your HSA was established.

Q. What happens if I have a medical expense early in the year and there isn't enough money in my HSA to cover my out-of-pocket costs?

- A. An HSA works like a bank account. You can only spend what's in the account. However, you can wait to start the reimbursement process for services incurred after you enrolled in your HSA until you have more funds in your account. You can also set up recurring payments for larger expenses as the HSA is funded.

Q. Are dental and vision care considered qualified medical expenses for the purposes of an HSA?

- A. Yes, many dental, orthodontia, and eye care expenses are considered qualified medical expenses. However, cosmetic procedures, such as cosmetic dentistry, would not be considered a qualified medical expense. For a detailed list, please use the QME tool at qme.anthem.com.

Q. How can I find out more about HSA regulations?

- A. Go to the U.S. Treasury website at treasury.gov and enter HSA in the search box. You may also read [IRS Publication 969](#).¹

Q. I am enrolled in a health reimbursement account (HRA). What happens to that money if I choose an HSA for 2021?

A. Unused funds from your HRA will be transferred to a separate account. The funds in this account do not count toward the annual contribution maximum for HSAs. The funds in this account will automatically be used to lower your coinsurance for healthcare costs you have after you meet your annual deductible.

Q. Are any administrative fees charged to my HSA?

A. Yes, see a **list of standard administrative and other related fees** that may be charged to your HSA by your administrator.

Q. Do I have to use funds from my HSA to pay for healthcare costs?

A. No, you may pay out of pocket with after-tax dollars and let your HSA balance grow tax-free.

Q. How does the money I contribute to my HSA help me save on taxes?

A. Any money you contribute to your HSA is (federal) tax-deductible. That means it's not counted as taxable income for the year. If you put \$1,000 into your HSA, your adjusted gross income for the year is lowered by \$1,000, which could lower what you owe for taxes, depending on your tax status.

Tax benefits

Q. What are the tax benefits of an HSA?

- A. There are several benefits:
- Contributions to the account are tax-free.
 - Any investment and interest earned in your account are (federal) tax-free.
 - Withdrawals from the account for qualified medical expenses are (federal) tax-free.
 - Depending on the state where you live, you may save on state taxes as well.

Your privacy

Q. Is your website secure?

A. Yes, our customer-only website is secure and password-protected. Your personal information is kept safe using the highest encryption level available.

Q. What is your privacy policy?

A. You can read the *Privacy Policy* anytime at **anthem.com**.

Do you have additional questions?

Connect with us online at **anthem.com** or call Member Services at the number on your ID card.

The information included does not constitute legal, tax, or benefit plan design advice. We strongly encourage you to consult with a tax advisor before establishing a health savings account. Any health savings account will be established between the individual account holder and the HSA custodian or trustee. Anthem is responsible for the administration of the health plan, and the custodian is responsible for the administration of the HSA.

¹ Internal Revenue Service. *Publication 969, Health Savings Accounts and Other Tax-Favored Health Plans* (January 3, 2020): [irs.gov/pub/irs-pdf/p969.pdf](https://www.irs.gov/pub/irs-pdf/p969.pdf).

² Internal Revenue Service. *Publication 502, Medical and Dental Expenses (Including the Health Coverage Tax Credit)* (January 8, 2021): [irs.gov/pub/irs-pdf/p502.pdf](https://www.irs.gov/pub/irs-pdf/p502.pdf).

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Get the most from your health plan

Use your health savings account (HSA) to help cover costs

The health savings account (HSA) that comes with your Anthem plan can prepare you for future healthcare costs. Contribute to your account tax-free, then use it to pay for eligible expenses* when the time comes. The money you put into your account is yours to keep even if you switch health plans, change jobs, or retire. Plus, any unused funds remain in your account from year to year, so they're there when you need them.



Use your HSA to pay for healthcare costs, such as:

- Deductible payments
- Coinsurance
- Ambulance and emergency services
- Lab tests
- Hospital fees
- Noncosmetic prescription drugs
- Copays

For a full list of qualified medical expenses, please visit [anthem.com/qme](https://www.anthem.com/qme)



Invest your HSA funds to save even more

After your HSA balance reaches \$1,000, anything over that amount can be invested. Your contributions will grow tax-free and can help you pay for future medical expenses.

Review your investment options on the *Spending Accounts* page when you log in to our mobile app or [anthem.com](https://www.anthem.com).

How to use your HSA:



1

Add money to your HSA anytime or contribute through paycheck deductions.

In 2022 you can add up to \$3,650 for individuals or \$7,300 for families.

These limits include your employer's contribution to your account:

\$100 Employee/Individual/Self

\$200 Employee/Individual/Self +1

\$300 Employee/Individual/Self + children

\$400 Family



3

Use your HSA debit card to pay for doctor visits, prescriptions, and other qualified medical expenses. You can also use the HSA online bill-pay tool to pay medical bills or reimburse yourself with the funds in your account. When a new claim comes in, you can log in to your account to see if it is eligible for reimbursement, then pay the bill or reimburse yourself from your HSA.



2

Look out for your debit card in the mail. Your HSA debit card works the same as a credit card after you activate it.



4

Log in to [anthem.com](https://www.anthem.com) and download the Sydney Health mobile app to:

- See your HSA balance and claims.
- Find a doctor in your plan's network.
- Estimate your costs before you go for care.
- Set your preferences to receive important information electronically.

Your health plan vocabulary

Knowing certain key words and phrases, like the ones below, can give you a better understanding of your health plan and your HSA.

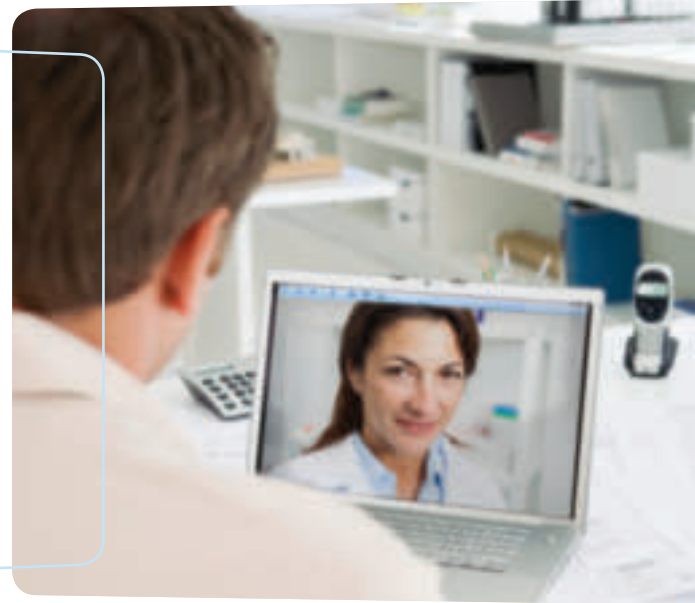
- **Deductible** – the amount you pay for healthcare services each year before your plan starts to pay
- **Coinsurance** – the percentage of the costs you pay for covered services once you meet your deductible
- **Out-of-pocket maximum** – the maximum amount you will pay out of pocket for covered services in a plan year. This includes your deductible and coinsurance costs.
- **Network** – the doctors, hospitals, pharmacies, and other healthcare professionals that have agreed to lower rates for services
- **Copay** – a flat fee you pay for covered healthcare services

For a full list of eligible medical and dental expenses, visit irs.gov/pub502.

Anthem Blue Cross and Blue Shield is the trade name of: In Colorado: Rocky Mountain Hospital and Medical Service, Inc. HMO products underwritten by HMO Colorado, Inc. Copies of Colorado network access plans are available on request from member services or can be obtained by going to [anthem.com/co/networkaccess](https://www.anthem.com/co/networkaccess). In Connecticut: Anthem Health Plans, Inc. In Georgia: Blue Cross Blue Shield Healthcare Plan of Georgia, Inc. In Indiana: Anthem Insurance Companies, Inc. In Kentucky: Anthem Health Plans of Kentucky, Inc. In Maine: Anthem Health Plans of Maine, Inc. In Missouri (excluding 30 counties in the Kansas City area): RightCHOICE® Managed Care, Inc. (RIT), Healthy Alliance® Life Insurance Company (HALIC), and HMO Missouri, Inc. RIT and certain affiliates administer non-HMO benefits underwritten by HALIC and HMO benefits underwritten by HMO Missouri, Inc. RIT and certain affiliates only provide administrative services for self-funded plans and do not underwrite benefits. In Nevada: Rocky Mountain Hospital and Medical Service, Inc. HMO products underwritten by HMO Colorado, Inc., dba HMO Nevada. In New Hampshire: Anthem Health Plans of New Hampshire, Inc. HMO plans are administered by Anthem Health Plans of New Hampshire, Inc. and underwritten by Matthew Thornton Health Plan, Inc. In Ohio: Community Insurance Company. In Virginia: Anthem Health Plans of Virginia, Inc. trades as Anthem Blue Cross and Blue Shield in Virginia, and its service area is all of Virginia except for the City of Fairfax, the Town of Vienna, and the area east of State Route 123. In Wisconsin: Blue Cross Blue Shield of Wisconsin (BCBSWI), underwrites or administers PPO and indemnity policies and underwrites the out of network benefits in POS policies offered by Compcare Health Services Insurance Corporation (Compcare) or Wisconsin Collaborative Insurance Corporation (WCIC). Compcare underwrites or administers HMO or POS policies; WCIC underwrites or administers Well Priority HMO or POS policies. Independent licensees of the Blue Cross and Blue Shield Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc.

No waiting room, no need to leave home.

You can also meet with board-certified Psychiatrists using LiveHealth Online!



When you're not feeling well you can get the support you need easily using LiveHealth Online. Whether you have a cold, you're feeling anxious or need help managing your medication, doctors and mental health professionals are right there, ready to help you feel your best. Using LiveHealth Online you can have a video visit with a board-certified doctor, psychiatrist or licensed therapist from your smartphone, tablet or computer from home or anywhere.

On LiveHealth Online, you can:

- **See a board-certified doctor 24/7.** You don't need an appointment to see a doctor. They're always available to assess your condition and send a prescription to the pharmacy you choose, if needed.¹ It's a great option when you have pink eye, a cold, the flu, a fever, allergies, a sinus infection or another common health issue.
- **Visit a licensed therapist in four days or less.**² Have a video visit with a therapist to get help with anxiety, depression, grief, panic attacks and more. Schedule your appointment online or call **1-888-548-3432** from **8 a.m. to 8 p.m.**, seven days a week.
- **Consult a board-certified psychiatrist within two weeks.**³ If you're over 18 years old, you can get medication support to help you manage a mental health condition. To schedule your appointment call **1-888-548-3432** from **8 a.m. to 8 p.m.**, seven days a week.

You've got access to affordable and convenient care

Your Anthem plan includes benefits for video visits using LiveHealth Online, so you'll just pay your share of the costs — usually \$59 or less for medical doctor visits, and a 45-minute therapy or psychiatry session usually costs the same as an office mental health visit.

Sign up for LiveHealth Online today – it's quick and easy

Go to livehealthonline.com or download the app and register on your phone or tablet.



LiveHealth
O N L I N E

1 Prescription availability is defined by physician judgment and state regulations. Visit the home page of livehealthonline.com to view the service map by state.

2 Appointments subject to availability of a therapist.

3 Prescriptions determined to be a "controlled substance" (as defined by the Controlled Substances Act under federal law) cannot be prescribed using LiveHealth Online. Psychiatrists on LiveHealth Online will not offer counseling or talk therapy. Appointments subject to availability.

Online counseling is not appropriate for all kinds of problems. If you are in crisis or have suicidal thoughts, it's important that you seek help immediately. Please call 1-800-784-2433 (National Suicide Prevention Lifeline) or 911 and ask for help. If your issue is an emergency, call 911 or go to your nearest emergency room. LiveHealth Online does not offer emergency services.

If you're a retiree or have coverage that complements your Medicare benefits, your employer sponsored health plan may not include coverage for online visits using LiveHealth Online. Check your plan documents for details. You can still use LiveHealth Online, but you may have to pay the full cost of a visit. Online visits using LiveHealth Online may not be a covered benefit for HRA and HIA+ members.

LiveHealth Online is the trade name of Health Management Corporation, a separate company, providing telehealth services on behalf of Anthem Blue Cross and Blue Shield.

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Manage your spending account online

You're in control of your spending account dollars. Take advantage of online tools to keep track of your spending and manage your account.

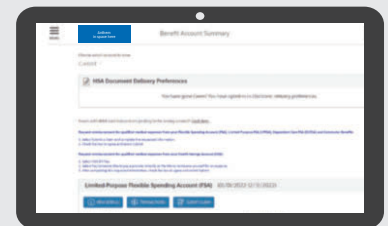
Start at anthem.com or in the SydneySM Health app

On your desktop

Go to anthem.com to register. Under the *My Plan* tab, choose **Spending Accounts** to view your balance(s). Then, select **Manage My Account** to go to your benefit account summary.

On your smartphone

Go to the **SydneySM Health** mobile app to register. Under the *More* tab, choose **Spending Accounts** to view your balance(s). Then, select **Manage My Account**.



Benefit Account Summary

This page gives you a summary of your spending account, including your current balance(s). You will also see recent alerts and transactions, with dates and status information.

At the top left of the page is a menu icon that allows access to *My Accounts*, *Claims*, *Resources*, and *How It All Works*. Each has a drop-down menu of tasks.



My Accounts

Benefit Account Summary is where you can:

- Check your benefit account summary.
- Review or make contributions.
- Review your recent transactions.
- Pay your doctor, hospital, or other health care provider (if applicable).
- Reimburse yourself for a payment you made (if applicable).



Direct deposit

Setting up direct deposit for reimbursement ensures you receive your funds fast.

Desktop

1. Log in at **anthem.com**.
2. Under the *My Plan* tab, choose **Spending Accounts** and then **Manage My Account**.
3. Under *Claims*, choose **Reimbursement Preference**.
4. Select **Direct Deposit** and complete the requested information.
5. Check the box to agree and select **Save**.

Mobile

1. Log in to the Sydney Health app.
2. Select the *More* tab. Then, select **Spending Accounts**.
3. Select your plan, then choose **Manage My Account**.
4. Under the menu, select **My**, then choose **User Profile**. Then, select **Reimbursement Method** and choose **Direct Deposit**.



Order a debit card for your dependent

You can request an additional debit card online so your dependent can access your spending account dollars or funds.

Desktop

1. Log in at **anthem.com**.
2. Under the *My Plan* tab, choose **Spending Accounts** and then **Manage My Account**.
3. In the upper right corner, choose your name, select **Profile**, and then select the orange **Add Family Member**.

Mobile

1. Log in to the Sydney Health app.
2. Under the *More* tab, choose **Spending Accounts**.
3. Select your plan, then choose **Manage My Account**.
4. In the upper left corner, choose **My** from the menu, then select **User Profile** and **Add Family Member**.

Once the dependent has been added, you will receive an additional debit card in the mail within 7 to 10 business days.

Request reimbursement for qualified medical expenses.



Health savings account (HSA)

Desktop

1. Log in at **anthem.com**.
2. Under the *My Plan* tab, choose **Spending Accounts** and then **Manage My Account**.
3. Then, choose **Benefit Account Summary** from the menu and select **Bill Pay**.
4. Select **Pay Someone Else** to pay a provider directly or **Pay Me** to reimburse yourself for an expense.
5. After completing the requested information, check the box to agree and select **Submit**.

Mobile

1. Log in to the Sydney Health app.
2. Select the *More* tab. Then, select **Spending Accounts**. Select your plan, then select **Manage My Account**.
3. Go to the menu, then select **Add claim for immediate reimbursement**.
4. Select **HSA bill pay**.



Health reimbursement account (HRA) with debit card (including incentive accounts), Flexible spending account (FSA), Limited-purpose FSA (LPFSA), Dependent care FSA (DCFSA), and Commuter benefits

Desktop

1. Log in at **anthem.com**.
2. Under the *My Plan* tab, choose **Spending Accounts** and then **Manage My Account**.
3. Then, select **My Accounts** from the menu and then choose **Benefit Account Summary**.
4. Select **Submit a claim** and complete the requested information.
5. Check the box to agree and select **Submit**.

Mobile

1. Log in to the Sydney Health app.
2. Go to the *More* tab, then select **Spending Accounts**.
3. Select your plan, then select **Manage My Account**.
4. Go to the menu, then select **Submit a claim** and complete the requested information.
5. Check the box to agree and select **Submit**.



Check all your claims activity, including the status.

Desktop

1. Log in at **anthem.com**.
2. Under the *My Plan* tab, choose **Spending Accounts** and then **Manage My Account**.
3. From the menu, select **Claims**, then select **Claim Activity**.
4. Your claims details will be listed here, including the amount, date of service, and status of each claim.
5. Select a claim to see more details, such as the provider or tracking number. Choose Add Receipt if it's needed for a claim.
6. Select **Bill Pay** for HSA or **Add Expense** for accounts other than an HSA.

Mobile

1. Log in to the Sydney Health app.
2. Select the *More* tab. Then, go to **Spending Accounts** and select your plan.
3. Select **Manage My Account**. Then, go to *Menu*, select **Claims**, then select **Claims Activity**.

Resources

Choose this section to:

- Read important announcements about your spending account.
- Review a list of qualified medical expenses
- Download or view important forms, such as:
 - Claims
 - Account maintenance
 - Disclosures
 - IRS resources



Save on fees with eStatements

To enroll in electronic statements:

1. Go to the top of your spending accounts dashboard and select **Statements** (if you don't see this option, you are already enrolled in electronic statements and don't have to do anything else).
2. Open the *Sample PDF File* and find the PDF PIN code.
3. Enter the code into the PDF PIN number box and select **Submit**.

How it works

Go online to learn more about how your spending account works. You can find tips, watch a video, use a calculator to help you understand your account, and find additional details, such as:

- Who contributes to the account and how much.
- How to use the account.
- How you benefit from the account.
- What expenses your funds can pay for.



Quick links on your account dashboard

Desktop

At the top right of your dashboard, select **your name** to connect to helpful information.

Mobile

In the Sydney Health app, select *More* in the bottom right corner. Go to **Spending Accounts**. Select your plan, then select **Manage My Account**. Go to the menu, then choose *Notifications* to connect to helpful information.

You can use this information to:

- Report if your debit card is lost or stolen and you need a new one.
- Review your recent alerts about your account.
- Read your messages, most of which ask you to take action.
- Let us know how you would like us to communicate with you.

Your Health Savings Account (HSA)

To make contributions to your HSA, you need to add a bank account.



Add a bank account

Desktop

1. From the menu, select **My Accounts** and choose **Benefit Account Summary**. Then, select **Contributions**.
2. Select **Add Bank Account**.
3. A pop-up box will open so you can enter information about your bank account.
4. Choose **Submit**. A quick validation follows, with two small credits and a debit applied to your bank account.
5. Check your bank account for these test transactions and note the amounts.
6. Go back to your HSA page. Choose the bank account you've added and select **Validate Account**.
7. A pop-up box will open. Enter the transaction amounts applied to your bank account and choose **Submit**. You can now contribute to your HSA from your preferred bank account.

Mobile

1. In the menu, select *Benefit Account Summary*.
2. Then, select **HSA Plan**.
3. Select **Contributions**. Then, select **Bank Accounts**.
4. Choose **Add Bank Account**.



Make a contribution

Desktop

1. From the menu, choose **Benefit Account Summary**.
2. Choose **Contributions**, then select **Add Contribution**.
3. A pop-up box will open. Enter the date and desired contribution amount, and choose your preferred bank account from the drop-down list.
4. Select **Submit**. Your contribution will immediately appear on the *Transactions* page.

Mobile

1. In the menu, from the *Benefit Account Summary*, select **HSA Plan**.
2. Select **Contributions**, then select **Add Contributions**.

Note: You may only contribute up to the maximum amount allowed by the IRS for the plan year. Check your annual contribution limit before contributing.



We are here to help make managing your healthcare expenses easier

If you have questions, send us an email through the Message Center at [anthem.com](https://www.anthem.com) or call us at the Member Services number on your ID card.



Sydney Health is offered through an arrangement with CareMarket, Inc., a separate company offering mobile application services on behalf of Anthem Blue Cross and Blue Shield ©2021-2022.

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Save money with discounts at anthem.com

As an Anthem member, you qualify for discounts on products and services that help promote better health and well-being.* These discounts are available through SpecialOffers to help you save money while taking care of your health.

Vision, hearing and dental

Glasses.com™ and 1-800-CONTACTS® — Shop for the latest brand-name frames at a fraction of the cost for similar frames at other retailers. You are also entitled to an additional \$20 off orders of \$100 or more, free shipping and free returns.

EyeMed — Take 30% off a new pair of glasses, 20% off non-prescription sunglasses and 20% off all eyewear accessories.

Premier LASIK — Save \$800 on LASIK when you choose any “featured” Premier LASIK Network provider. Save 15% with all other in-network providers.

TruVision — Save up to 40% on LASIK eye surgery at more than 1,000 locations.

Nations Hearing — Receive hearing screenings and in-home service at no additional cost. All hearing aids start at \$599 each.

Hearing Care Solutions — Digital instruments start at \$500, and a hearing exam is free. Hearing Care Solutions has 3,100 locations and eight manufacturers, and offers a three-year warranty, batteries for two years and unlimited visits for one year.

Amplifon — Take 25% off, plus an extra \$50 off one hearing aid; \$125 off two.

ProClear™ Aligners — Take \$1,200 off a set of custom aligners. You can improve your smile without metal braces and time-consuming dental visits. Your order is 50% off and comes with a free whitening kit.

Fitness and health

Active&Fit Direct™ — Active&Fit Direct allows you to choose from more than 11,000 participating fitness centers nationwide for \$25 a month (plus a \$25 enrollment fee and applicable taxes). Offered through American Specialty Health Fitness, Inc.

FitBit — Work toward your fitness goals with Fitbit trackers and smartwatches that go with your lifestyle and budget. Save up to 22% on select Fitbit devices.

Garmin — Take 20% off select Garmin wellness devices.

Jenny Craig® — Join this weight loss program for free. Jenny Craig provides you with everything you need, making it easier to reach your goals. You can save \$200 in food, in addition to free coaching, with minimum purchase. Save an extra 5% off your full menu purchase. Details apply.

ChooseHealthy® — Discounts are available on acupuncture, chiropractic, massage, podiatry, physical therapy and nutritional services. You also have discounts on fitness equipment, wearable trackers and health products, such as vitamins and nutrition bars.

GlobalFit — Discounts apply on gym memberships, fitness equipment, coaching and other services.

Family and home

23andMe — Take \$40 off each Health + Ancestry kit. Save 20% on a 23andMe kit and learn about your wellness, ancestry and more.

Safe Beginnings® — Babyproof your home while saving 15% on everything from safety gates to outlet covers.

Nationwide Pet Insurance — Receive an automatic 5% discount when you enroll through your company or organization. Save up to 15% when you enroll multiple pets.

ASPCA Pet Insurance — Take 5% off pet insurance. You can choose from three levels of care, including flexible deductibles and custom reimbursements.

WINFertility® — Save up to 40% on infertility treatment. WINFertility helps make quality treatment affordable.

LifeMart® — Take advantage of great deals on beauty and skin care, diet plans, fitness club memberships and plans, personal care, spa services and yoga classes, sports gear and vision care.

Medicine and treatment

SelfHelpWorks — Choose one of the online Living programs and save 15% on coaching to help you lose weight, stop smoking, manage stress or diabetes, restore sound sleep or face an alcohol problem.

Brevena — Enjoy a 41% discount on BREVENA® skin care creams and balms for smooth, rejuvenated skin from face to foot.

Puritan's Pride® — Choose from a large selection of discounted vitamins, minerals and supplements from Puritan's Pride.

Allergy Control Products and National Allergy Supply — Save up to 25% on select doctor-recommended products such as allergy-friendly bedding, air purifiers and filters, asthma products and more. Orders over \$59 ship for free by ground within the contiguous U.S.

To find the discounts available to you, log in to [anthem.com](https://www.anthem.com), choose **Care** and select **Discounts**.

Your SpecialOffers discounts are part of our effort to support your personal health journey. Taking care of your health can be easier with the savings offered through your health plan.

*** All discounts are subject to change without notice.**

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Sydney Health makes health care easier

See your benefits. Find a doctor. Track your fitness. It's personalized and easy!

With Sydney Health, you can find everything you need to know about your medical, pharmacy, dental, and vision benefits all in one place. Sydney Health makes it easier to get things done, so you can spend more time focused on your health.

Get started with Sydney Health
Download the app today!



Simple experience

Our **simple experience** makes it easy to find what you need — with one-click access to benefits info, Member Services, LiveHealth Online and wellness resources. And you can use the interactive chat to get answers quickly.

My Health Dashboard

My Health Dashboard is your hub for personalized health and wellness. Find programs that interest you, build an action plan to help you meet your health goals, sync your fitness tracker and earn points for your progress.

Personalized Match

Personalized Match helps you find a doctor in your plan who's right for you. You'll get results carefully matched with your unique needs, preferences and plan details.

With just one click, you can:

- Find care and check costs
- See all benefits
- View claims
- View and use digital ID cards
- Use the interactive chat feature to get answers quickly
- Sync your favorite fitness tracker

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Expanding your virtual care options

Find complete care support, on your time, through the **Sydney Health app**

Visit with a doctor at your convenience

Accessing the care you need, when you need it, matters. That's why our SydneySM Health mobile app connects you to a team of doctors ready to help you on your time. There are two secure ways to find no- or low-cost care through our app:

- ① **Chat with a doctor 24/7 without an appointment**
 - Urgent care support for health issues, such as allergies, a cold, or the flu.
 - New prescriptions for concerns such as a cough or a sinus infection.
- ② **Schedule a virtual primary care appointment**
 - Routine care, including wellness check-ins and prescription refills.
 - Personalized care plans for chronic conditions, such as asthma or diabetes.

Assess your symptoms with the Symptom Checker

When you're sick, you can use the Symptom Checker on Sydney Health to answer a few questions about how you're feeling. That information is run against millions of medical data points to provide care advice tailored to you.

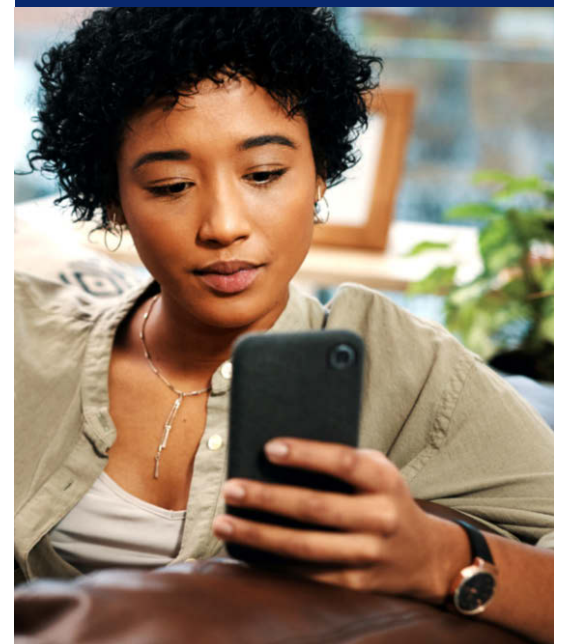
Save money and time with virtual care

Sydney Health brings care to you anywhere, anytime. The Symptom Checker is always free to use, while virtual primary care visits and on-demand urgent care through the app are available at no or low cost.

▶ Download our Sydney Health mobile app today.



Set up your account right away and it will be ready to use when you need it.



85% of virtual visits **resolve** the person's need.*

*K Health analysis of Q4 2020 visit dispositions.

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Wellbeing Solutions

Focus on your well-being and earn rewards up to \$700

The more activities you complete, the greater your reward.

The Wellbeing Solutions program connects you with easy-to-use digital health and wellness tools that can help you stay your best. When you complete any of the activities listed below sponsored by your employer, you'll earn rewards to put toward an account deposit. You choose the activities you'd like to complete to receive the maximum of \$700 in rewards.

| Activity Type | Activities | Amount |
|--|---|------------------------------|
|  Preventive care | Have an annual preventive wellness exam or well woman exam with your doctor | \$20 |
| | Get an annual cholesterol test ¹ | \$5 |
| | Have a colorectal cancer screening (ages 45 and older) | \$25 |
| | Have a routine mammogram (women ages 40 to 74) | \$25 |
| | Have an annual eye exam ² | \$20 |
| | Get an annual flu shot | \$10 |
|  Condition management programs | ConditionCare: Work one-on-one with your health coach and earn rewards for participating in and completing the program ³ | Up to \$225 (\$90/\$135) |
| | Future Moms: Moms-to-be can receive support from a registered nurse and earn rewards for completing initial, interim, and postpartum assessments ⁴ | Up to \$125 (\$65/\$30/\$30) |
| | Well-being Coach – Weight Management: Receive one-on-one coaching by phone as you complete your goal to earn a reward. ⁵ | \$60 |
| | Well-being Coach – Tobacco Cessation: Receive one-on-one coaching by phone as you complete your goal to earn a reward. ⁶ | \$60 |

| Activity Type | Activities | Amount |
|---|---|---|
|  Digital & wellness activities | Log in to your Anthem account | \$5 |
| | Connect a fitness or lifestyle device | \$5 |
| | Complete a health assessment and receive tailored health recommendations | \$20 |
| | Complete action plans around eating healthy, weight management, and physical activity | Up to \$20 (\$4 per action plan) |
| | Track your steps | Up to \$60 (\$2 per 50,000 steps tracked) |
| | Complete Well-being Coach digital daily check-ins ⁷ | Up to \$20 (\$4 per milestone) |
| | Update your contact information | \$15 |

Well-being Coach can help you meet your goals

The Well-being Coach digital coaching app from Lark offers you 24/7 personalized support. Well-being Coach can help you maintain a healthy weight, quit tobacco, and improve your nutrition, exercise habits, mindfulness, and sleep. If you need extra support with weight management or quitting tobacco, you can also talk to a certified health coach.

Access Well-being Coach in the SydneySM Health app or at [anthem.com](https://www.anthem.com).

Earn rewards

Here's how and when you'll earn rewards for completing the activities already mentioned.

Preventive care: Simply visit your doctor for any of the screenings or appointments listed in the chart. Your rewards are added to your account after your claim is processed, which may take up to 60 days.

Condition management: Rewards are added to your account as you meet certain benchmarks or complete a program. Programs include: ConditionCare (for asthma, diabetes, and heart or lung conditions), Future Moms, and Well-being Coach for weight management and tobacco cessation.

Digital and wellness activities: Log in to the Sydney Health app or [anthem.com](https://www.anthem.com) to complete available activities, such as taking a health assessment, participating in the Well-being Coach Digital program, and tracking your steps. Rewards are added to your account as activities are completed.

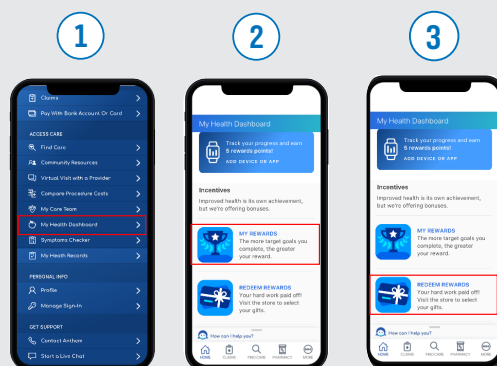


Use your rewards

- 1 To view your rewards, open the Sydney Health app or go to **anthem.com**. Next, go to *My Health Dashboard*.
- 2 Select **My Rewards**.
- 3 Select **Redeem Rewards** to see how much you've earned. Use your rewards toward an account deposit.



Scan this QR code to download the Sydney Health app.



Do you have questions?

Log in at **anthem.com** or open the Sydney Health app. Then go to *My Health Dashboard* and select **My Rewards** to learn more. You can also call Member Services at the number on your ID card.

1 Annual cholesterol test eligibility: men 35 years and older, women 40 years and older with a full cholesterol (lipid) panel.

2 Annual eye exam reward is available if employer provides vision coverage through Anthem.

3 Adult members identified as moderate or high risk are eligible for ConditionCare and may receive a reward for participation in 1 of 5 ConditionCare programs and completion for 1 of 5 ConditionCare programs: (Chronic Obstructive Pulmonary Disease (COPD), Coronary Artery Disease (CAD), Asthma, Diabetes, and Congestive Heart Failure (CHF). Rewards include: \$40 for program participation and \$80 for program completion.

4 Future Moms assessments completion dates: Initial assessment must be completed by day 97; Interim assessment must be completed by 1 day prior to delivery; Postpartum Assessment must be completed by 56 days after delivery. Rewards include: \$35 for an initial assessment; \$20 for an interim assessment; and \$20 for a postpartum assessment.

5 Well-being Coach Weight Management program (telephonic) is available for members who are identified as high risk based on a BMI of 30 or higher.

6 Well-being Coach Tobacco Cessation program (telephonic) is available for members who are identified as high risk based on any tobacco usage.

7 Members may earn rewards for completing quarterly Well-being Coach digital milestones while logging daily check-in activities on the app. Daily check-ins reward values: first check-in: \$4; next 15 check-ins during first quarter: \$4; 25 check-ins during second through fourth quarters: \$4 each quarter. Log in to Sydney Health or anthem.com to download the Well-being Coach digital app. Well-being Coach is provided by Lark Health.

We encourage you to actively participate in your rewards program. Any rewards you earn must be redeemed before the end of the current plan year. Once the plan year ends, any unused rewards are forfeited, and your reward balance will reset to \$0 at the beginning of the new plan year.

All preventive care activities are claims-based. Medical waivers apply to all claim-based activities.

Rewards eligibility applies to only employees and their spouse/domestic partner. Members must be active on the plan and activity must take place during the plan effective year.

A subscriber and spouse/domestic partner may earn rewards when eligible activities are completed and, in some instances, are verified by an Anthem claim.

Product availability may vary. The reward amount redeemed may be considered income to you and/or your spouse/domestic partner and subject to state and federal taxes in the tax year it is paid. You and/or your spouse/domestic partner should consult a tax expert with any questions regarding tax obligations.

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Protecting your privacy

How we keep your information safe and secure

As a member, you have the right to expect us to protect your personal health information. We take this responsibility very seriously, following all state and federal laws, as well as our own policies.

You also have certain rights and responsibilities when receiving your healthcare. To understand how we protect your privacy, your rights and responsibilities when receiving healthcare, and your rights under the Women's Health and Cancer Rights Act, go to [anthem.com/privacy](https://www.anthem.com/privacy). For a printed copy, please contact your Benefits Administrator or Human Resources representative.

How we help manage your care

To see if your health benefits will cover a treatment, procedure, hospital stay, or medicine, we use a process called utilization management (UM). Our UM team is made up of doctors and pharmacists who want to be sure you receive the best treatments for certain health conditions. They review the information your doctor sends us before, during, or after your treatment. We also use case managers. They're licensed healthcare professionals who work with you and your doctor to help you manage your health conditions. They also help you better understand your health benefits..

For additional information about how we help manage your care, go to [anthem.com/memberrights](https://www.anthem.com/memberrights). To request a printed copy, please contact your Benefits Administrator or Human Resources representative.

Special enrollment rights

Open enrollment usually happens once a year. That's the time you can choose a plan, enroll in it, or make changes to it. If you choose not to enroll, there are special cases when you're allowed to enroll during other times of the year.

- **If you had another health plan that was canceled.** If you, your dependents, or your spouse are no longer eligible for benefits with another health plan (or if the employer stops contributing to that health plan), you may be able to enroll with us. You must enroll within 31 days after the other health plan ends (or after the employer stops paying for the plan). For example: You and your family are enrolled through your spouse's health plan at work. Your spouse's employer stops paying for health coverage. In this case, you and your

spouse, as well as other dependents, may be able to enroll in one of our plans.

- **If you have a new dependent.** You gain new dependents from a life event, such as marriage, birth, adoption, or if you have custody of a minor and an adoption is pending. You must enroll within 31 days after the event. For example: If you marry, your new spouse and any new children may be able to enroll in a plan.
- **If your eligibility for Medicaid or SCHIP changes.** You have a special period of 60 days to enroll after:
 - You (or your eligible dependents) lose Medicaid or the State Children's Health Insurance Program (SCHIP) benefits because you're no longer eligible..
 - You (or eligible dependents) become eligible to receive help from Medicaid or SCHIP for paying part of the cost of a health plan with us.

Prior Authorization Pass program

All in-network doctors in Connecticut who meet certain criteria are able to participate in Anthem's Prior Authorization Pass program. Under this program, eligible doctors will no longer need to submit a request and wait for preapproval for Anthem members on more than 400 common outpatient medical procedures done in Connecticut.*

*Exceptions: BlueCard Host members, Federal Employee Program members, and New York State or New York City employees.

For full details, read your plan documents, which contain everything you need to know about your plan. You can find them on [anthem.com](https://www.anthem.com).

It's important we treat you fairly

We follow federal civil rights laws in our health programs and activities. By calling Member Services, our members can get free in-language support, and free aids and services if you have a disability. We don't discriminate, exclude people, or treat them differently on the basis of race, color, national origin, sex, age or disability. For people whose primary language isn't English, we offer free language assistance services through interpreters and other written languages. Interested in these services?

Call the Member Services number on your ID card for help (TTY/TDD: 711). If you think we failed in any of these areas, you can mail a complaint to: Compliance Coordinator, P.O. Box 27401, Mail Drop VA2002-N160, Richmond, VA 23279, or directly to the U.S. Department of Health and Human Services, Office for Civil Rights at 200 Independence Avenue, SW; Room 509F, HHH Building; Washington, D.C. 20201. You can also call 1-800- 368-1019 (TDD: 1-800-537-7697) or visit <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>.



Notes



Your plan is here for you to use

If you would like extra help

If you have questions, we are here to help. Contact us through our online Message Center or call the Member Services number on your ID card.



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