

# It pays to have COVA HealthAware!

Offered by the Commonwealth of Virginia



Plan year July 1, 2018 – June 30, 2019

www.covahealthaware.com Aetna Concierge 1-855-414-1901



00.02.434.1 D (4/18)

## It pays to have COVA HealthAware!



## Go to www.covahealthaware.com to watch videos on how COVA HealthAware can work for you!

In just a few minutes, you'll learn all about COVA HealthAware, how the HRA works, and see how the plan is a great option for different types of members.







#### Save on health costs with your HRA

Learn from Juan, a young and healthy member who's making the most of his COVA HealthAware plan and the HRA that helps him save.

## Improve your health and manage your chronic conditions

Learn how Laticia – 54 years old with diabetes – and her husband Max use their COVA HealthAware plan to save on costs and improve their health.

## **Recover without the stress of large medical expenses**

Learn how Maureen – 46 years old with a torn ACL – minimized the cost of her surgery thanks to her COVA HealthAware plan.

Questions about COVA HealthAware? Call Aetna Concierge at **1-855-414-1901** or visit **www.covahealthaware.com**.

## It pays to have COVA HealthAware!

The COVA HealthAware benefit plan includes a Health Reimbursement Arrangement (HRA) with incentive opportunities to reward you for healthy activities you may already be doing.

#### The HRA is designed to give you more control over your health benefit dollars and help pay your eligible out-of-pocket expenses

Administered by Aetna, this plan includes:

- Medical, behavioral health, pharmacy, dental, vision and hearing benefits
- Coverage for in-network preventive care at 100 percent
- Annual contribution to your HRA with opportunities to earn additional funds by completing incentives called "Do Rights"
- Coverage for in-network benefits through a large national network
- Coverage for out-of-network benefits (higher coinsurance, additional deductible and out-of-pocket maximum apply)
- A single medical, behavioral health and pharmacy deductible which all counts toward your out of-pocket maximum
- Convenient member tools to help you monitor your health and your plan
- See more details on page 6

### **Questions?**

Have a question about COVA HealthAware benefits?

Call Aetna Concierge at 1-855-414-1901 or visit www.covahealthaware. com.

Enrolled members have access to Aetna Navigator<sup>®</sup>, a secure member website. See page 9 for more information.

## **How COVA HealthAware works**

#### **Preventive care benefits**

COVA HealthAware is designed to help you and your family maintain good health! The plan pays 100 percent for eligible in-network preventive care — you pay nothing.

These services include things like:

- Routine physicals
- Well-child exams and immunizations
- Gynecological exams and mammograms
- Prostate specific antigen screenings
- Digital rectal exams
- Colorectal cancer screenings

For a full list of eligible preventive care benefits, register with **Aetna Navigator** after enrollment, or contact the Aetna Concierge.

If you use out-of-network providers for preventive care, it'll be treated like any other out-of-network medical service —meaning the charges will be subject to your out-of-network deductible, and will be covered at 60 percent (plus you may be balance billed).

When you use in-network providers, your preventive care is covered at 100% with no cost to you.



#### A health fund to help you pay for eligible out-of-pocket medical, behavioral health and pharmacy expenses

Your COVA HealthAware plan includes an account called a health reimbursement arrangement (HRA). Each plan year, your HRA is funded to help you pay your out-of-pocket medical costs, like your annual deductible, for covered services. Funds used from your HRA also counts towards your annual deductible! If the money in your HRA is depleted before you reach your deductible, you'll be responsible for meeting the remainder of your deductible before plan coverage kicks in.

#### Here's how your HRA is funded:

#### **Annual contribution**

- At the beginning of the plan year you receive your annual HRA contribution. Effective July 1, 2018:
- Employee/Retiree only \$600
- Employee/Retiree + spouse \$1,200

*If you enroll after the plan year begins, the contribution to your HRA will be prorated. Contact your Benefits Administrator or visit www.COVAHealthAware.com* for more information.

#### Incentives

• You can earn additional HRA contributions during the plan year by completing certain actions to improve your health. Each of these "Do Rights" will get you an additional \$50

(up to \$150) and up to \$150 for an enrolled spouse. They include:

- Annual routine physical exam
- Preventive dental visit
- Annual routine vision exam
- Annual flu shot
- ActiveHealth Management online Health Tracker
- ActiveHealth Management online Coaching Module

View and complete ActiveHealth Management "Do Rights"

#### at www.myactivehealth.com/COVA.

- There are additional incentive opportunities for members who are engaged in the ActiveHealth Management Healthy Beginnings maternity program and Healthy Insights pre-bariatric surgery coaching program.
- It's just that easy HRA contributions are funded the month following reporting of your completed "Do Rights". You can track your completed "Do Rights" through Aetna Navigator.

#### And here's how those funds are used:

- When you incur eligible medical, behavioral health and pharmacy out-of-pocket expenses, they'll be paid automatically from your HRA. These expenses will continue to be paid from your HRA as long as there is money in the account.
- Although there is no additional HRA contribution for covered children, your HRA will help pay expenses for any family member on the plan.
- If you spend all the funds in your HRA, you're responsible for paying your part of any covered medical expenses until you've met the remainder of your annual deductible. (See information on deductible limits in the next section.)
- If you have money remaining in your HRA at the end of the plan year, it'll roll over into the following plan year as long as you stay in the plan. And there is no limit on the amount of funds that can roll over from year to year, so it can really add up!

It's easy to keep track of your HRA dollars with online tools you can access 24/7 through Aetna Navigator.

#### Annual deductible

The deductible is the amount you pay out of your own pocket for your expenses before the health plan begins to pay benefits. Eligible medical, behavioral health and pharmacy expenses all count toward your annual deductible.

#### Annual deductibles:

· One person:	\$1,500 in-network/	
	\$3,000 out-of-network	
· Two or more	\$3,000 in-network/	
persons:	\$6,000 out-of-network	

As you can see, your deductible for in-network care is much lower. In addition, when you use in-network providers, your expenses are typically less because you get the benefit of Aetna's negotiated rates, and coinsurance will be lower.

Do the math–when you and your enrolled spouse complete three or more "Do Rights" per plan year in addition to your annual HRA contribution, that covers half of your annual deductible!

## Medical, behavioral health and pharmacy benefits

Once you meet your annual deductible, your COVA HealthAware plan pays:

- 80 percent of your remaining eligible expenses (you pay 20 percent coinsurance) for **in-network** care
- 60 percent of your remaining eligible expenses (you pay 40 percent coinsurance) for **out-of-network** care.
- You will be subject to paying any amount over the allowable charge when using out-of-network providers

#### Remember, over time, if you roll over HRA dollars from year to year, you may have enough HRA funds to pay your coinsurance.

#### A single out-of-pocket maximum

There is a limit on how much you have to pay each plan year out of your own pocket for eligible medical, behavioral health and pharmacy expenses. Once you reach this limit, COVA HealthAware will pay for all remaining covered expenses at 100 percent of the allowable charge for the rest of the plan year.

## The out-of-pocket limit includes the annual deductible, even if it is paid by your HRA.

The most you'll have to pay out-of-pocket in any plan year is:

· One person:	\$3,000 in-network/
	\$6,000 out-of-network
· Two or more	\$6,000 in-network/
persons:	\$12,000 out-of-network

#### Pharmacy benefit details

Your COVA HealthAware plan also includes pharmacy coverage. This coverage is integrated with your health plan, and the money in your HRA can be applied to your pharmacy out-of-pocket expenses. And, just like medical expenses, once the funds in your HRA are spent, you're responsible for paying your pharmacy expenses until you reach your annual deductible. Once you meet your deductible, COVA HealthAware covers both approved retail and mail-order prescriptions, like this:

#### Retail (at your local drug store)

In-network pharmacy	
Up to 90-day supply	80% of allowable costs (you pay 20% coinsurance)
Out-of-network pharmacy	
Up to 90-day supply	60% of allowable costs (you pay 40% coinsurance)

#### Mail-order

Up to 90-day supply80% of allowable costsFrom Aetna Rx Home(you pay 20% coinsurance)Delivery®

When it comes to prescription drug coverage, please remember:

- The COVA HealthAware pharmacy plan includes a broad network of participating pharmacies.
- Generic contraceptive drugs and devices are covered at no cost to you.
- Participating in ActiveHealth Management's programs for Hypertension, Asthma/COPD, and Diabetes can help you receive certain generic and preferred brand drugs, and diabetic supplies at no cost to you!
- Mandatory Generic Program if you or your doctor requests a brand drug when a generic version is available, you pay the difference in cost between the brand and generic drug, in addition to your deductible and coinsurance.
- COVA HealthAware also includes access to a specialty pharmacy.

Certain members may be contacted to engage in the Medication Therapy Management program, designed to enhance the effectiveness of your medication therapy.

Want to know what your prescription will cost? Once enrolled, check out prices in advance on Aetna Navigator.

If your family members enroll in the plan, each person is responsible for no more than the one person limit towards the annual deductible and out-of-pocket maximum. This protects you from significant out-of-pocket expenses for any one family member.

#### **Dental benefits**

Your COVA HealthAware plan includes diagnostic and preventive dental services, covered at 100 percent, when using an in-network dentist. Remember, if you use an out-of-network dentist:

- You may pay more for your dental care, as the dentist may bill you for the difference between billed and allowable charges
- You may have to file a claim form

If you want more dental coverage, you can buy an Expanded Dental option. This buy-up option provides coverage for primary and major services, including fillings, crowns and even orthodontia. The amount of coverage provided varies by service.

See the Benefits At-a-Glance on page 11.



#### **Vision benefits**

Your plan includes coverage for an annual routine eye exam. You are also eligible to buy optional Expanded Vision coverage if you purchase the Expanded Dental option. The vision buy-up option includes an annual allowance toward the purchase of eyeglasses or contact lenses. And you get access to discounts on other vision services, including non-covered eyeglasses, accessories, LASIK eye surgery and more.

See the Benefits At-a-Glance on page 11.

#### **Behavioral health benefits**

COVA HealthAware also includes behavioral health benefits. The plan gives you access to support and treatment for behavioral conditions, covered at the same level as your medical benefits.

#### **Employee Assistance Program (EAP)**

The COVA HealthAware EAP offers short-term counseling on all aspects of life for up to 4 visits per incident per plan year at no cost to you.

*Confidential assistance is available 24 hours a day, 7 days a week for concerns including:* 

- Depression
- Work/family stress
- Substance abuse
- Child/elder care issues

The EAP also can assist you with financial guidance, debt and budgeting assistance, and retirement planning. Crisis response services are also available.

## **COVA HealthAware programs and resources**

#### **Aetna Navigator**

COVA HealthAware makes managing your health and your health expenses easy with Aetna Navigator, your secure member website. Once enrolled in COVA HealthAware,this site gives you 24/7 access to all of your plan information. You can:

- · Find a doctor, dentist, pharmacy or hospital
- · Print a temporary ID card or order a new card
- · Check on the status of a claim
- · Look up your benefit coverage levels
- Track your health care costs, including what's left on your deductible or other out-of-pocket limits
- · Look up your HRA balance and track incentives
- Check the price of a drug before you go to a pharmacy
- Access the Member Payment Estimator to let you see and compare what tests and procedures cost in your area
- Get help understanding your particular medical condition and treatment options available to you
- And much more!

You can access Aetna Navigator from **www.aetna.com** and **www.covahealthaware.com**, then click "Sign Up Now". Be sure to use your member ID number from your ID card to register for Aetna Navigator.

#### **Informed Health Line**

Provides you and your family 24/7 telephone and e-mail access to registered nurses to help avoid unnecessary visits to the ER or doctor's office. You can also get information on health topics, help understanding health issues, and referrals to other helpful programs. Contact the Aetna Concierge line or send an e-mail through Aetna Navigator to reach a registered nurse.

## Teladoc – Talk to a doctor anytime, anywhere and save money!

Teladoc provides you and your enrolled family members with 24/7/365 access to U.S. board-certified doctors and pediatricians who can diagnose and recommend treatment by phone or online video and prescribe medications – all for less than a traditional doctor's visit! You pay \$40 per consultation, which applies to your deductible and can be paid from your HRA. When the deductible has been met, you pay 20 percent coinsurance, or \$8. Visit **www.teladoc.com/aetna** or call **1-855-Teladoc** to learn more, set up an account or request a consultation.

#### Aetna Discount Program

Save money on your health and wellness! As an Aetna member, you'll have access to discounts on things like gym memberships, weight-loss programs, eyeglasses, massage therapy and more! There are no claims forms or limits to how much you can save. And your family members may be able to save, too!

#### **Aetna Mobile**

You never know when you'll need it, but you'll always know where to find it. Use the Aetna Mobile app on select smart phones or connect with the Aetna mobile site on other mobile devices to have 24/7 access to your secure member information!

#### **ActiveHealth Management**

A robust wellness program is integrated with your health plan to help you organize your health information and take action towards a healthier lifestyle. Programs include:

### *Healthy Insights:* Help with long-term health conditions

*Healthy Lifestyles:* Active lifestyle coaching *Healthy Beginnings:* Maternity management program

#### As a COVA HealthAware member, you have access to many valuable tools and resources

Visit www.COVAHealthAware.com for direct links to:

- Aetna Navigator
- Aetna DocFind®
- Aetna EAP Services
- My ActiveHealth

Aetna Concierge Line 1-855-414-1901

Aetna EAP Service www.mylifevalues.com Username and Password: COVA 1-888-238-6232

ActiveHealth Management www.myactivehealth.com/cova 1-866-938-0349

Commonwealth of Virginia DHRM www.dhrm.virginia.gov 1-888-642-4414

ALEX- Your Interactive Benefits Counselor www.myalex.com/cova/2017

## **COVA HealthAware Benefits At-a-Glance**

neuten Kennbursement Antungement (mkk)	
Employee/retiree only	\$600
Employee/retiree + spouse	\$1,200
Optional "Do Right" activities	\$50 per "Do Right" activity up to \$150 per employee/retiree and up to \$300 per employee/retiree + spouse

The HRA is used to pay out-of-pocket costs for covered medical, behavioral health, and pharmacy expenses, which count towards the annual deductible and out-of-pocket limit!

#### **In-Network Benefits**

Health Reimbursement Arrangement (HRA)

#### **COVA HealthAware You Pay**

**Plan-Year Funding** 

Deductible – per plan year (includes pharmacy expenses)	
One person	\$1,500
Two or more persons	\$3,000
Out-of-pocket expense limit – per plan year (includes deduc	
One person	\$3,000
Two or more persons	\$6,000
Doctor's visits	
Teladoc	\$40 per consultation (\$8 after deductible)
Primary care physician	20% after deductible
Specialist	20% after deductible
Hospital services	
Inpatient	20% after deductible
Outpatient	20% after deductible
Ambulance travel	20% after deductible
Emergency room visits	20% after deductible
Outpatient diagnostic, X-rays, lab tests and shots	20% after deductible
Infusion services (includes IV or injected chemotherapy)	20% after deductible
Outpatient therapy visits	
Occupational, physical and speech therapy	20% after deductible
Chiropractic (30 visit plan year limit per member)	20% after deductible
Applied behavior analysis (ABA) for autism spectrum disorder – ages 2 through 10	20% after deductible
Behavioral health visits	20% after deductible
<b>Employee Assistance Program (EAP)</b> (up to 4 visits per incident per plan year)	\$0

Prescription drugs – mandatory generic	
Retail pharmacy (up to 90-day supply)	20% after deductible
Home delivery pharmacy (mail service) <i>(up to 90-day supply)</i>	20% after deductible
<b>Dental services</b> Diagnostic and preventive	\$0
Annual routine vision exam	\$0
Annual routine hearing exam	\$0
Wellness & preventive services	\$0
Birth to 3 years (office visits at specified intervals, immunizations, lab and X-rays)	\$0
All members (annual wellness exam, preventive screenings and tests) See page 5 for more information	\$0

#### **Out-of-Network benefits**

Deductible (per plan year): \$3,000 one person/\$6,000 two or more persons

Out-of-pocket maximum (per plan year): \$6,000 one person/ \$12,000 two or more persons

40% coinsurance after deductible. Provider may balance bill for amount above allowable charge.

#### **Optional Benefits (offered for an additional premium) COVA HealthAware You Pay**

Expanded	Dental
----------	--------

•	
Plan year maximum benefit – per member	\$2,000
Plan year deductible	\$50/\$100/\$150
<b>Primary</b> (fillings, extractions, root canals)	20% after deductible
Complex restorative (inlays, onlays, crowns, dentures, bridgework)	50% after deductible
Orthodontic	50% no deductible
Lifetime maximum benefit for orthodontia	\$2,000
kpanded Vision	
Routine eye exam (included in health plan once every plan year)	\$0
Eyeglass frames (once every plan year)	80% after plan pays \$100
Lenses (once every plan year)	
Eyeglass lenses (standard plastic; single, bifocal or trifocal)	\$20
Conventional contact lenses (in lieu of eyeglass lenses)	85% after plan pays \$100
Disposable contact lenses (in lieu of eyeglass lenses)	Balance after plan pays \$100
Non-elective contact lenses (covered when eyeglasses are not an option)	Balance after plan pays \$250

This is intended as a summary only and not a full description of benefits. For more detail on coverage and benefits, contact the Aetna Concierge line at **1-855-414-1901** or visit **www.covahealthaware.com**.

### Aetna is the brand name used for products and services provided by one or more of the Aetna group of subsidiary companies, including Aetna Life Insurance Company (Aetna).

This material is for information only. Health/dental benefits, health/dental insurance, life and disability insurance plans/ policies contain exclusions and limitations. Providers are independent contractors and are not agents of Aetna. Provider participation may change without notice. Aetna does not provide care or guarantee access to health services. Aetna HealthFund HRAs are subject to employer-defined use and forfeiture rules and are unfunded liabilities of your employer. Fund balances are not vested benefits. Investment services are independently offered through JPMorgan Institutional Investors, Inc., a subsidiary of JPMorgan Chase Bank. Information is not a substitute for diagnosis or treatment by a physician or other health care professional. Information is believed to be accurate as of the production date; however, it is subject to change. For more information about Aetna plans, refer to **www.aetna.com**.

#### www.covahealthaware.com



©2018 Aetna Inc. 00.02.434.1 D (4/18)