Quality medical coverage with you in mind

Your Connecticut Partnership Plan medical benefits through Anthem Blue Cross and Blue Shield
Table of contents

SECTION 1: You deserve a health plan that meets your needs ............................................. 3
SECTION 2: What is new about your plan ............................................................................ 4
SECTION 3: Plan details ........................................................................................................ 8
SECTION 4: Web and mobile plan resources ..................................................................... 10
SECTION 5: Other important plan features ........................................................................ 14
SECTION 6: Mental health resources ................................................................................. 18
SECTION 7: SpecialOffers@Anthem SM ............................................................................... 20
You deserve a health plan that meets your needs.

That is why we offer the benefits, services, and programs to support you throughout your healthcare journey — with the doctors you trust and the Connecticut Partnership Plan by your side.

With your Connecticut Partnership Plan medical benefits through Anthem Blue Cross and Blue Shield (Anthem), you can take advantage of plan features that include:

- An Enhanced Dedicated Customer Service team comprised of professionals and care coordinators who are experts at resolving benefit issues of our non-State public sector employees.
- A broad network of hospitals and doctors in Connecticut and across the country.
- Doctors and hospitals in nearly 200 countries around the world through the Blue Cross Blue Shield Global® Core program.
- New digital tools that make it easy to access your plan status, offer personalized wellness information, and guide you to preferred, high-quality care exclusive to your medical plan.
- Preventive care covered at 100%, as well as financial incentives through the State of Connecticut Health Enhancement Program (HEP).
- The flexibility to choose care from either in-network or out-of-network doctors or facilities, with cost shares adjusted accordingly.
- Programs for weight management, autism, quitting smoking, eating disorders, behavioral health, and substance misuse.
- Health education resources, plan tools, and product and service discounts.
- Cost-share waivers for chronic conditions, such as asthma, diabetes, and chronic obstructive pulmonary disease (COPD).

Note: Connecticut Partnership Plan members have access to many State of Connecticut programs and features, including the Health Enhancement Program (HEP).

Urgent and emergency care

Did you know almost 30% of emergency room (ER) visits are for nonemergency conditions that can often be treated more quickly at high-quality, lower-cost care locations? You have ER, urgent care, and telehealth options available, with a cost share of:

- $250 ER visit copay
- $15 Urgent care or walk-in center visit copay
- $5 LiveHealth Online (telehealth) or Cuidado Médico visit copay

For help deciding where to go for care, call the 24/7 NurseLine at 800-711-5947. A registered nurse can answer your questions and help direct you to the best place for care.

1 For details about the Health Enhancement Program, go to cthep.com or call 877-687-1448.
3 The copay is waived if admitted.
What is new about your plan

Welcome to Anthem
When it comes to your health and the health of your family, it is important that you have access to healthcare that’s right for your needs. We encourage you to take advantage of the programs and resources available to you through your Anthem plan, and to register online or download Sydney, our new mobile app. See page 8 for more information.

Care Compass
Care Compass (CareCompass.CT.gov) is the online home for all State of Connecticut benefit information, including the Connecticut Partnership Plan. Select the Partnership Employee button to be directed to your information. You will also have direct access to the Health Enhancement Program (HEP) and Health Navigator, your plan’s first point of contact for benefit questions.

Network of Distinction
Through the State of Connecticut’s Network of Distinction program, you have access to high-quality doctors, hospitals, and medical groups for common medical procedures. Under your plan, providers meeting certain care delivery performance standards are designated “Network of Distinction.” Those achieving the highest performance standards under the program are designated “Centers of Excellence.” Common care services under this program include:

- Hip, shoulder, and knee surgery
- Bariatric surgery
- Cardiac procedures
- Colonoscopies
- Prenatal care and delivery

4 For a complete list of care services under the Network of Distinction program, visit CareCompass.CT.gov or contact a Health Navigator at 866-611-8005.
We encourage you to always choose Network of Distinction providers if you need care that has been identified as part of this program. Not only will you benefit from the best care, you might also earn a cash reward. For a complete procedure list and to find out how to qualify, call a Health Navigator at 866-611-8005. See page 6 for details.

**Note:** If your nearest Network of Distinction provider is far from home, you may also qualify for travel reimbursement to make the journey easier.

**Reminder:** Network of Distinction doctors and care locations for certain procedures should be your first choice for high-quality care. However, we know there are many other outstanding primary and specialty care doctors covered under your health plan. If you need help finding in-network primary care doctors or specialists outside the Network of Distinction program, contact the Enhanced Dedicated Member Services at 800-922-2232 or use the Find Care tool at [anthem.com/statect](http://anthem.com/statect).
Health Navigator

To assist you in finding a doctor, understanding your benefits, and navigating the healthcare system, your Connecticut Partnership Plan benefits now include support through the Health Navigator program. Health Navigators are your central points of contact for questions or concerns about Network of Distinction program benefits and provider quality, and other health plan issues. They will help you locate the best Network of Distinction providers for your needs and confirm whether you qualify for a cash incentive. They will even help you schedule appointments.

The support you receive from Health Navigators will be highly coordinated with Anthem’s Enhanced Dedicated Member Services team to simplify your healthcare experience and connect you to the right care.

You can learn more about the program online, at CareCompass.CT.gov/navigator, or by calling 866-611-8005.

Health Navigator support line

The Health Navigator support line is staffed by trained professionals who can help you navigate both your plan and the healthcare system.

Health Navigators are available by phone, at 866-611-8005, Monday to Friday, 8 a.m. to 10 p.m. Eastern time.

Live interactive chat

You can also use the Health Navigator live interactive chat feature to speak with a representative. Go to CareCompass.CT.gov/navigator.

Health Navigator search tool

Finding quality care under your plan is not only good for your health, it can help you earn a cash reward for choosing that doctor for an eligible procedure. The Health Navigator search tool lets you know if you might be eligible for the reward. Look for a gold star or silver trophy icon next to the name of the doctor or care location. You can learn more about the program online and access the Health Navigator search tool at CareCompass.CT.gov/nod.

To find Network of Distinction care locations and confirm whether you are eligible for a reward or travel reimbursement, contact a Health Navigator at 866-611-8005. You can schedule an appointment with Network of Distinction doctors through a Health Navigator or from your smartphone or other digital device using the Sydney Care app. Learn more about this mobile health tool in the “Web and mobile plan resources” section.

Important: To qualify for the incentive payment under the Network of Distinction program, you MUST contact a Health Navigator to confirm your appointment with a designated provider, or to have them schedule that appointment for you.
New ID card

You are receiving a new medical ID card from Anthem in the mail. Please make note of these changes:

1. A single card for both medical and pharmacy benefits
2. New member ID number
3. New group number
4. New Care Compass logo
5. Contact information for Health Navigator

To avoid claims processing issues, please share your new ID card with your primary care doctor, pharmacy, and any other care providers you or your dependents use under your plan. You can also download a copy of your ID card online or through the Sydney Health app — and will be able to email it to your doctor.

How does my digital ID card work?

It works exactly like the ID card you receive in the mail. You can show, email, or fax it to your doctors from your smartphone, computer, or other device. You do not have to wait until your appointment. You can send your digital ID card to your doctor at the same time that you make your appointment. Many doctors can also look up your digital ID card through our system.

5. The reward will vary by procedure and location.
6. On the Health Navigator online search tool, Centers of Excellence will appear first, clearly noted by a gold star. Doctors and locations that have earned the Network of Distinction designation will appear next, noted by a silver trophy icon. To learn more about these designations and find doctors and care locations under your plan that are part of the Network of Distinction program, go to Healthadvocate.com/stateofConnecticut.
### Plan details

**State BlueCare Point of Service (POS)**

<table>
<thead>
<tr>
<th>Benefit features</th>
<th>In network</th>
<th>Out of network</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Up-front deductible</strong></td>
<td>HEP enrollees: None</td>
<td>Not applicable</td>
</tr>
<tr>
<td></td>
<td>Non-HEP Individual: $350 individual</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Non-HEP Family: $350 each member ($1,400 maximum)</td>
<td></td>
</tr>
<tr>
<td><strong>Deductible</strong></td>
<td>None</td>
<td>Individual: $300</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Family: $900</td>
</tr>
<tr>
<td><strong>Coinsurance</strong></td>
<td>None</td>
<td>20% of the allowable charge plus 100% of any amount your provider bills over the allowable charge</td>
</tr>
<tr>
<td><strong>Annual out-of-pocket maximums</strong></td>
<td>HEP enrollees: None</td>
<td>HEP enrollees: Individual: $2,000 (plus deductible)</td>
</tr>
<tr>
<td></td>
<td>Non-HEP Individual: $350 individual</td>
<td>Non-HEP enrollees: Individual: $2,000 (plus deductible)</td>
</tr>
<tr>
<td></td>
<td>Non-HEP Family: $350 each member ($1,400 maximum)</td>
<td>Non-HEP enrollees: Family: $4,000 (plus deductible)</td>
</tr>
<tr>
<td><strong>Lifetime maximum</strong></td>
<td></td>
<td>None</td>
</tr>
<tr>
<td><strong>Outpatient physician visits, walk-in centers, urgent care centers</strong></td>
<td>$15 copay</td>
<td>80%</td>
</tr>
<tr>
<td><strong>Preventive care</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Children</strong></td>
<td>No copay with well-child visits and immunizations</td>
<td>80%</td>
</tr>
<tr>
<td><strong>Adults</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Family planning</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Vasectomy</strong></td>
<td>100%</td>
<td>80%</td>
</tr>
<tr>
<td><strong>Tubal ligation</strong></td>
<td>100%</td>
<td>80%</td>
</tr>
<tr>
<td><strong>Inpatient hospital</strong></td>
<td>100% (prior authorization required)</td>
<td>80% (prior authorization required)</td>
</tr>
<tr>
<td><strong>Inpatient physician</strong></td>
<td>100% (prior authorization required)</td>
<td>80% (prior authorization required)</td>
</tr>
<tr>
<td><strong>Outpatient surgical facility</strong></td>
<td>100%</td>
<td>80%</td>
</tr>
<tr>
<td><strong>Ambulance</strong></td>
<td>100% (if emergency)</td>
<td></td>
</tr>
<tr>
<td><strong>Pre-admission certification/ concurrent review</strong></td>
<td>Through participating provider</td>
<td>Penalty of 20%, up to $500 for no certification; member responsibility</td>
</tr>
</tbody>
</table>

If you have questions about your benefits, call Health Navigator at 866-611-8005 or the Enhanced Dedicated Member Services team at 800-922-2232.

This does not constitute your health plan or insurance policy. It is only a general description of the plan. Please refer to your plan documents for exclusions and limitations under the plan. Anthem Blue Cross and Blue Shield provides administrative claims payment services only and does not assume any financial risk or obligation with respect to claims.
<table>
<thead>
<tr>
<th>Benefit features</th>
<th>In network</th>
<th>Out of network</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Mental health</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inpatient</td>
<td>100% (prior authorization required)</td>
<td>80% (prior authorization required)</td>
</tr>
<tr>
<td>Outpatient</td>
<td>$15 copay</td>
<td>80%</td>
</tr>
<tr>
<td><strong>Substance abuse</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Detoxification</td>
<td>100%</td>
<td>80%</td>
</tr>
<tr>
<td>Inpatient</td>
<td>100% (prior authorization required)</td>
<td>80% (prior authorization required)</td>
</tr>
<tr>
<td>Outpatient</td>
<td>$15 copay</td>
<td>80%</td>
</tr>
<tr>
<td><strong>Skilled nursing facility</strong></td>
<td>100% (prior authorization required)</td>
<td>80%, up to 60 days per year (prior authorization required)</td>
</tr>
<tr>
<td><strong>Home healthcare</strong></td>
<td>100%</td>
<td>80%, up to 200 visits per year</td>
</tr>
<tr>
<td><strong>Hospice</strong></td>
<td>100% (prior authorization required for inpatient)</td>
<td>80%, up to 60 days (prior authorization required for inpatient)</td>
</tr>
<tr>
<td><strong>Short-term rehabilitation and physical therapy</strong></td>
<td>100%</td>
<td>80%, up to 60 inpatient days; 30 outpatient days per condition, per year</td>
</tr>
<tr>
<td><strong>Diagnostic X-ray and lab</strong></td>
<td>100% — Site of Service preferred provider</td>
<td>60% — out-of-network Site of Service provider</td>
</tr>
<tr>
<td></td>
<td>80% — Site of Service nonpreferred provider</td>
<td></td>
</tr>
<tr>
<td><strong>Pre-admission testing</strong></td>
<td>100%</td>
<td>80%</td>
</tr>
<tr>
<td><strong>Emergency care</strong></td>
<td>$250 copay</td>
<td>$250 copay</td>
</tr>
<tr>
<td><strong>LiveHealth Online</strong></td>
<td>$5 copay</td>
<td>Not applicable</td>
</tr>
<tr>
<td><strong>Urgent care</strong></td>
<td>$15 copay</td>
<td>80%</td>
</tr>
<tr>
<td><strong>Walk-in center</strong></td>
<td>$15 copay</td>
<td>80%</td>
</tr>
<tr>
<td><strong>Durable medical equipment</strong></td>
<td>100%</td>
<td>80%</td>
</tr>
<tr>
<td><strong>Prosthetics</strong></td>
<td>100%</td>
<td>80%</td>
</tr>
<tr>
<td><strong>Routine eye exam</strong></td>
<td>$15 copay, one exam per year(^{11})</td>
<td>50%, one exam per year</td>
</tr>
<tr>
<td><strong>Audiological screening</strong></td>
<td>$15 copay, one exam per year</td>
<td>80%, one exam per year</td>
</tr>
</tbody>
</table>

*Note:* Previously, speech therapy was only covered for treatment resulting from autism, stroke, tumor removal, injury, or congenital anomalies of the oropharynx. In-network treatment of any of these conditions is unlimited. This benefit remains. This is an expanded benefit. Now, members can have up to 30 visits covered for diagnoses that do not fall under one of the four conditions.  

\(^{11}\) HEP participants have the $15 copay waived once every two years.
Web and mobile plan resources

anthem.com/ctpartner

This website features tools to help you:
- Find a doctor.
- Estimate your costs before a procedure or service.
- View your ID card.
- See your medical benefits and claims.

Sydney Health app

The Sydney Health app makes it easier to manage your health plan. You can find what you need in one place, chat with Member Services, access LiveHealth Online, and:
- Check benefits information and claim details.
- Compare the costs for healthcare services based on your coverage.
- Search for doctors, other healthcare professionals, and facilities in your plan.
- Connect to virtual care options.
- Access and use your digital ID card.
- Sync your favorite fitness tracker.

My Health Dashboard on the Sydney Health app

My Health Dashboard connects you with wellness information that interests you — whether it is health and wellness tips, nutritionist-approved recipes, or personalized action plans — to help you reach your health goals. My Health Dashboard is tailored to your individual health journey every step of the way.

You can also use My Health Dashboard to find and connect with clinical and well-being programs for everything from pregnancy to heart disease.

Start today by downloading Sydney Health and visiting My Health Dashboard.

Use the Sydney Health app today.
Sydney Care app

Sydney Care is a mobile health tool that helps users identify symptoms, see doctors online, and schedule appointments with Network of Distinction doctors. Sydney Care services include:

- **Symptom Checker** — This symptom questionnaire takes only minutes to complete for reliable, personalized results.

- **Virtual Visit** — Through texts or secure two-way video, doctors can talk to you, diagnose your condition, prescribe medicine, and recommend specialists or urgent care.¹

- **The Care Market** — Use this tool to schedule appointments with select Network of Distinction care providers.²

You can download the Sydney Health app from the App Store® or Google Play™. Once you register and log in, follow the prompts to access Sydney Care.

LiveHealth Online and LiveHealth Online Psychology

If you or a covered family member experiences a common health issue, like the flu or allergies, you can quickly see a board-certified doctor for quality care without leaving home.

LiveHealth Online connects you to doctors by two-way video, 24/7, in English or Spanish. All you need is a smartphone, tablet or computer with a camera. Doctors can assess your condition, provide treatment, and send a prescription to a local pharmacy.² An online visit under your health plan only has a **$5 copay**.

You can also virtually visit with a licensed therapist or psychologist through LiveHealth Online Psychology for stress, anxiety, depression, and family issues. Appointments are usually available within four days and the same **$5 copay** applies.²⁹ Look at the “Mental health resources” section for more information.

You can connect to LiveHealth Online using anthem.com/ctpartner or Anthem’s mobile app, Sydney Health.

---

¹ Prescription availability and a copay applicable to a specific medication and state regulations. Psychologists or therapists using LiveHealth Online cannot prescribe medications.

² For a complete list of care services under the Network of Distinction program, visit CareCompass.CT.gov or contact a Health Navigator at 866-611-8005.

³ Appointments are subject to the availability of a therapist. Online counseling is not appropriate for all kinds of problems. If you or a loved one is having suicidal thoughts, it is important that you seek help immediately. Please call the National Suicide Prevention Lifeline at 1-800-273-TALK (1-800-273-8255) or 911 for help. If in an emergency, call 911 or go to your nearest emergency room. LiveHealth Online does not offer emergency services.
Find Care

The Find Care tool makes it quick and simple for you to find high-quality local doctors and other health professionals in your plan, including doctors who are accepting new patients. You can look at detailed information, including:

- Specialties and quality ratings.
- Centers of Excellence or Network of Distinction doctors.
- Side-by-side comparisons of different doctors.

Access Find Care on anthem.com/statect or through the Sydney Health app.

Find Care search instructions

1. Log in to anthem.com/statect.
2. Select Find Care.
3. Enter a ZIP code and physician type.
4. You can also search by provider name or license number.
5. On the results screen, you can apply additional search criteria, like distance, affiliations, recognitions, languages spoken, and gender.

To make the most out of your benefits, use tools like Find Care as a registered user on our secure member website, anthem.com/statect. Visit anthem.com/register to create your account.
Other important plan features

Physical and occupational therapy

Your Connecticut Partnership employee health plan covers physical and occupational therapy (PT/OT) services from in-network and out-of-network healthcare professionals. All PT/OT service requests from a doctor are subject to a medical necessity review by our Utilization Management partner. Here is how that works:

1. You receive an initial evaluation for PT/OT.
2. The treating therapist submits an authorization request.
3. The therapist’s application for a medical necessity review will include an assessment of your condition and a proposed treatment plan. A doctor will review this plan against clinical guidelines and medical necessity criteria during your course of treatment.
4. A utilization manager will notify you and the requesting therapist of his or her decision by letter. You are not required to submit PT/OT medical necessity review requests; they are handled directly by the treating therapist.
Savings when you choose doctors in the State of Connecticut’s preferred network

Under your plan, you or your covered dependents do not have to pay an office visit copay if you visit primary care physicians (PCPs) who take part in one of the plan’s preferred networks or certain specialists who are identified by Anthem as value-based providers.10

Under this benefit, PCPs and certain specialists are grouped into two levels:

Choosing care from doctors in Value Tier 1 saves you the most.

If you select a Value Tier 1 PCP or specialist, you have no office visit copay. That is because doctors in this tier participate in one of the State of Connecticut’s preferred networks or have shown the ability to deliver quality care at a lower cost — a savings that your plan passes on to you. The Tier 1 network for providers is only available in the State of Connecticut.

In addition to PCPs, here are the specialties that are part of Value Tier 1:

- Allergy and immunology
- Cardiology
- Ear, nose, and throat (ENT)
- Obstetrics/gynecology (OB/GYN)
- Ophthalmology
- Orthopedic surgery
- Rheumatology
- Urology

Choosing other in-network doctors outside Tier 1 gives you access at your current $15 copay.

If you see an in-network PCP or specialist outside of Value Tier 1, you will still be covered at the in-network level, but you will pay the plan’s $15 office visit copay.

Under the benefit, you have the same broad access to network doctors and hospitals as you do today. And you will receive the same preventive care benefits, too. Now you can choose Value Tier 1 PCPs and specialists to save money. More than 85% of Anthem’s in-network PCPs participate in a value-based care program so you may already be working with a Value Tier 1 PCP and be eligible to save.

Select the Find Care tool on anthem.com/statect for a full list of in-network Connecticut PCPs and specialists, and to find out whether your PCP or specialist is in Value Tier 1. If you need help with this, call Health Navigator at 866-611-8005.

10 The tiered benefit under your Connecticut Partnership Plan applies to primary care physicians and the following medical specialties: allergy and immunology; cardiology; ear, nose and throat (ENT); endocrinology; gastroenterology; obstetrics/gynecology (OB/GYN); ophthalmology; orthopedic surgery; rheumatology; and urology. The preferred provider network is different from the Network of Distinction program.
Imaging, labs, and diagnostic X-rays are covered 100% by Site of Service providers

Under your plan, you will have 100% coverage ($0 copay) for lab tests, X-rays, and high-cost imaging services, like MRIs, if you select a Site of Service provider.

If you have lab or radiology services performed during a PCP or specialist’s office visit, you will have 100% coverage for these services. The Site of Service network is only in the State of Connecticut.

If you decide to access these services from providers outside the Site of Service program, the plan will cover 80% of the cost. So you will have a 20% cost share for outpatient lab tests, X-rays, and high-cost imaging services. If you have out-of-network benefits, the plan covers 60% of the cost.

Breast mammography, breast ultrasound, and pathology lab services are excluded from the Site of Service program

Select the Find Care tool on anthem.com/statect for a full list of Site of Service providers for lab tests, X-rays, and high-cost imaging services. An “SOS” designation will appear next to the provider’s name.
Mental health resources

The Connecticut Partnership Plan is committed to supporting your emotional well-being. If you or a family member needs behavioral healthcare, you have access to many helpful resources.

Child Parent/Guardian Outreach program

This program works with parent/guardians who have children receiving behavioral health services in a hospital setting. One of our care managers will reach out to you within 48 hours of your child’s admission. The care manager will:

- Help you understand what to expect from the doctors and hospital while your child is there.
- Make sure your family is involved with your child’s care.
- Answer your questions and let you know about other available resources.
- Involve your child’s regular behavioral health provider (if he or she has one).
- Discuss a treatment plan with you for when your child goes home.
- Keep working with you once your child is home.

LiveHealth Online Psychology

Your plan offers LiveHealth Online Psychology to connect you to a licensed therapist or psychologist online.3,10 Visit anthem.com/ctpartner or the Sydney Health app to register. Then, you can schedule a two-way video visit within four days. Members and their dependents age 10 and older are eligible for this service.

Autism Spectrum Disorder (ASD) program

If your child falls somewhere on the autism spectrum, your family may need support services. The ASD program focuses on the entire family, creating a strong system of care. It includes:

- A clinical review of applied behavior analysis. A highly trained team of licensed clinicians specializing in ASD will help make sure your child receives the care required for their individual needs.
- Community resources and family support. The ASD team connects the whole family to educational materials and other resources, so you can better understand your child and take part in treatment.
- Coordination of care. ASD case managers guide you through the healthcare system and address your unique challenges with a customized care plan. This plan will include and connect all of your child’s healthcare professionals.

To learn more, call an Anthem Behavioral Health care manager at 888-605-0580.
Intensive In-home Behavioral Health Services (IIBHS) for children, adolescents, and young adults

In-network access to many innovative in-home programs for members ages 3 to 24 with complex psychiatric or substance use challenges is available to you and your dependents under your health plan. These programs are for those who are at risk, or have a history of going to the emergency room or needing inpatient or residential treatment.

Members are usually referred to these programs by an emergency department, inpatient facility, or Anthem care manager.

Aware Recovery Care (ARC) for drug and alcohol addiction

ARC provides long-term substance use disorder treatment, including withdrawal management and medication-assisted treatment (MAT), in the comfort, privacy, and security of a patient’s own home. The programs:

- Provide a full year of treatment at a cost similar to a typical, 28-day inpatient stay.
- Work with your current doctors and clinicians to give ongoing, individualized medical and psychiatric care.
- Include frequent drug and alcohol screenings.

To learn more, call 203-779-5799, or go to awarerecoverycare.com.

Wheeler’s Substance Abuse Treatment and Recovery Services for youth and families

Wheeler Clinic offers in-home substance use disorder treatment for adults, as well as robust case management for members with complex substance use disorders through its Recovery Care Facilitation program.

To learn more, call Wheeler’s Navigation Center at 800-793-3588 or go to wheelerclinic.org.

Virtual opioid addiction treatment

Through Kaden Health, Anthem members now have access to secure, web-based treatment for themselves and family members who are misusing or overusing opioids. To learn more, call Kaden Health at 888-88-KADEN or visit kadenhealth.com.

Eating Disorder Management program

This program, staffed by nurses, master’s degree-level clinicians, psychologists, and dietitians, can help you and your family identify and face complex eating disorders.

- You will be contacted by the program if you have been admitted to any intensive level of care for eating disorder treatment. This includes inpatient care, as well as intensive outpatient, partial hospitalization, and residential treatment programs.
- If you are enrolled in the program, one of our care managers will work with you to ensure you are receiving the support you need.
SpecialOffers@Anthem℠

Connecticut Partnership Plan members can go to anthem.com/ctpartner to find special discounts on products and services that encourage healthy habits.

<table>
<thead>
<tr>
<th>Fitness and health</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Active&amp;Fit Direct™</strong></td>
<td>Allows you to choose from over 10,000 participating fitness centers nationwide for $25 a month (plus a $25 enrollment fee and applicable taxes). It is offered through American Specialty Health Fitness, Inc.</td>
</tr>
<tr>
<td><strong>Jenny Craig®</strong></td>
<td>Join for free, and earn $200 in food savings and free coaching with minimum purchase. Plus, save an extra 5% off your full menu purchase. Restrictions apply.</td>
</tr>
<tr>
<td><strong>SelfHelpWorks</strong></td>
<td>Choose one of the online Living programs and save over 60% on coaching to help you lose weight, stop smoking, manage stress, or face an alcohol problem.</td>
</tr>
<tr>
<td><strong>GlobalFit™</strong></td>
<td>Enjoy discounts on gym memberships, fitness equipment, and coaching.</td>
</tr>
<tr>
<td><strong>FitBit</strong></td>
<td>Become fit your way, with Fitbit trackers and smartwatches that fit your lifestyle, budget, and goals. Save up to 22% on select Fitbit devices.</td>
</tr>
<tr>
<td><strong>Garmin</strong></td>
<td>Receive 20% off select Garmin wellness devices.</td>
</tr>
<tr>
<td><strong>ChooseHealthy</strong></td>
<td>Receive discounts on acupuncture, chiropractic, and massage services.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Family and home</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Safe Beginnings®</strong></td>
<td>Save 15% on everything to babyproof your home from safety gates to outlet covers.</td>
</tr>
<tr>
<td><strong>WINFertility®</strong></td>
<td>Save up to 40% on infertility treatment. WINFertility helps make quality treatment less costly.</td>
</tr>
</tbody>
</table>
### Medicine and treatment

<table>
<thead>
<tr>
<th>Puritan’s Pride</th>
<th>Choose from a large selection of discounted vitamins, minerals, and supplements.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allergy Control Products and National Allergy Supply</td>
<td>Save up to 25% on select doctor-recommended products, such as allergy-friendly bedding, air purifiers and filters, and asthma products. Plus, enjoy free shipping on all orders over $59 when shipping ground within the United States.</td>
</tr>
</tbody>
</table>

### Vision and hearing

<table>
<thead>
<tr>
<th>Glasses.com™ and 1-800-CONTACTS®</th>
<th>Access the latest brand-name frames for a fraction of the cost at typical retailers — every day. Plus, you receive an additional $20 off orders of $100 and above, free shipping and free returns.</th>
</tr>
</thead>
<tbody>
<tr>
<td>EyeMed</td>
<td>Receive 30% off a new pair of glasses, 20% off nonprescription sunglasses, and 20% off all eyewear accessories.</td>
</tr>
<tr>
<td>Premier LASIK</td>
<td>Save $800 on LASIK if you choose any “featured” Premier LASIK network provider. Save 15% with all other in-network providers.</td>
</tr>
<tr>
<td>TruVision</td>
<td>Save up to 40% on LASIK eye surgery at more than 1,000 locations (over 6.5 million procedures performed in the network).</td>
</tr>
<tr>
<td>NationsHearing</td>
<td>Receive hearing screenings and in-home service at no additional cost. All hearing aids start at $599 each.</td>
</tr>
<tr>
<td>Hearing Care Solutions</td>
<td>Take advantage of digital instruments starting at $500, a free hearing exam, 3,100 locations, and eight manufacturers. You also receive a three-year warranty, two years of batteries, and unlimited visits for one year.</td>
</tr>
</tbody>
</table>

**Please note:** All of the offerings in the SpecialOffers@Anthem program are continually being evaluated and adjusted, so they may change. Any additions or changes will be communicated on our website, [anthem.com/ctpartner](http://anthem.com/ctpartner). Discounts and services are not benefits under your health plan. Discounts may be revised or eliminated without notice at any time. For more information on these discounts and to view additional discounts, visit [anthem.com/ctpartner](http://anthem.com/ctpartner).
Here every step of the way

Let us help connect you to the best care for you and your family. Call Health Navigator at 866-611-8005 or Anthem’s Enhanced Dedicated Member Services Team at 800-922-2232. You can also visit anthem.com/ctpartner.