



How your 2023 Anthem HMO plan works

Having a health plan that's straightforward and keeps your costs down can help you stay focused on your health without worrying about unexpected medical expenses.

Your Anthem health maintenance organization (HMO) plan lets you choose a primary care physician (PCP) to guide your care but doesn't require it.

Your plan offers:

- **A broad network** of doctors and hospitals using the same network as the health reimbursement arrangement (HRA) plans. The Anthem HMO plan doesn't offer benefits outside of your plan's network except for emergency care.
- **Just a co-pay** for many types of care.
- **100% coverage** for preventive care when you use a doctor in your plan's network.¹
- **Coverage for care** at retail health clinics and urgent care centers in your plan's network. They can help you save time and money when you need care right away, but it's not an emergency.
- **A MyIncentive Account** to hold credits you earn for healthy actions. You will be reimbursed from this account for covered care expenses like your out-of-pocket costs.
- **Behavioral health support and care** for mental health concerns and substance abuse, including video visits with a licensed therapist or board-certified psychiatrist.²

We're here to help you make the most of your HMO plan. Call Anthem's Member Services team at 855-641-4862, Monday to Friday, 8 a.m. to 8 p.m. ET.



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Frequently asked questions

What are the major differences between the Anthem HMO plan and the Anthem HRA plans?

Credits. The Anthem HRA plans come with base credits at the start of the plan year. The HMO plan doesn't. For both plans, you can earn points by completing healthy actions through the Be Well SHBP Program.³

Costs. The HMO plan has co-pays for certain services. The HRA plan doesn't.

Network. The HMO and HRA plans use the same network of doctors, facilities, and other healthcare professionals. With the HMO plan, you must use providers in your plan's network. The HRA plan offers coverage for services both in-network and out-of-network.

Can I choose my own doctor?

Yes. Each family member on the plan can choose their own doctor in the plan's network. You don't have to choose a PCP, but we recommend it. Your PCP can help you make health decisions and set up any care you may need with specialists.

Do I need a referral to see a specialist?

No, there's no referral required to see a specialist.

If my doctor isn't in the plan network, can I still use their services?

The Anthem HMO plan covers services in your plan's network only (except emergency care). If you see a doctor outside your plan's network, you'll need to pay the full amount they charge.

How do I find out if my doctor is in the plan's network?

You have three options.

1. Access our secure website at anthem.com/shbp and select **Find Care** from the menu.
2. Use the SydneySM Health mobile app, available on the App Store[®] or Google Play[™].
3. Call Anthem's Member Services team at 855-641-4862, Monday to Friday, 8 a.m. to 8 p.m. ET.



For information on monthly premiums/rates for the HMO plan, visit shbp.georgia.gov.

Do I have coverage when traveling out of state?

Yes. You have out-of-state coverage through our Anthem network of doctors and hospitals.

How does the MyIncentive Account work?

You and your covered spouse can each earn points by completing healthy actions.³ You have an option to redeem these points for well-being incentive credits. Once redeemed as credits, they are deposited into your MyIncentive Account. You will be reimbursed for covered medical and pharmacy expenses you paid for out of your own pocket.

How do I start earning points?

First, register at BeWellSHBP.com and complete your RealAge[®] Test. This confidential, online questionnaire takes about 10 minutes. At BeWellSHBP.com you will also find details on the other actions you can take to earn additional points.⁴

How many points can I earn?

You and your covered spouse can each earn up to 480 points by completing certain healthy actions.³ These points can be redeemed for well-being incentive credits that can be used with the HMO plan to reduce your out-of-pocket health and pharmacy expenses.

How do I receive a reimbursement after using my well-being incentive credits?

At your doctor's office, you pay your usual costs. Once your claim has been paid, you'll receive a MyIncentive Account summary in the mail along with a refund check for your covered out-of-pocket expenses. The refund won't exceed the amount of well-being incentive credits available in your account.



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¹ Services must be properly coded as preventive care under the Patient Protection and Affordable Care Act (PPACA).

² 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 800-784-2433 (National Suicide Prevention Lifeline) or 911 and ask for help. LiveHealth Online does not offer emergency services. 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.

³ Completing your well-being incentive actions with Sharecare will earn you points. You can choose to redeem these points for well-being incentive credits to use on covered medical and pharmacy expenses or the Visa Prepaid Card option. Visit BeWellSHBP.com for more information.

⁴ Points cannot be awarded until completion of the RealAge[®] Test.

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